

Fill in this information to identify the case:

Debtor name Navillus Tile, Inc.

United States Bankruptcy Court for the: Southern District of New York

Case number (if known): 17-13162 (SHL)

☐ Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. Schedule A/B: Assets—Real and Personal Property (Official Form 206A/B)

1a. Real property

Copy line 88 from *Schedule A/B*

\$ 0.00

1b. Total personal property:

Copy line 91A from *Schedule A/B*

\$ 90,972,135.71

1c. Total of all property:

Copy line 92 from *Schedule A/B*

\$ 90,972,135.71

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Hold Claims Secured by Property (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, at the bottom of page 1 of *Schedule D*

\$ 15,071,100.16

3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)

3a. Total claim amounts of priority unsecured claims:

Copy the total claims from Part 1 from line 5a of *Schedule E/F*

\$ 2,443,942.59

3b. Total amount of claims of non-priority amount of unsecured claims:

Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*

+ \$ 83,467,833.36

4. Total liabilities

Lines 2 + 3a + 3b

\$ 100,982,876.11

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Official Form 206A/B

Schedule A/B: Assets — Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- ☐ No. Go to Part 2.
- ☒ Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

2. Cash on hand

\$ _____

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	
3.1. See Attachment Part 1.3			\$ 21,076,160.69
3.2. _____			\$ _____

4. Other cash equivalents (Identify all)

4.1. _____	\$ _____
4.2. _____	\$ _____

5. Total of Part 1

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$ 21,076,160.69

Part 2: Deposits and prepayments

6. Does the debtor have any deposits or prepayments?

- ☐ No. Go to Part 3.
- ☒ Yes. Fill in the information below.

Current value of debtor's interest

7. Deposits, including security deposits and utility deposits

Description, including name or holder of deposit	
7.1. See Attachment Part 2.7	\$ 1,157,315.00
7.2. _____	\$ _____

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment

8.1. Prepaid Expenses \$ 25,000.00

8.2. _____ \$ _____

9. Total of Part 2.

Add lines 7 through 8. Copy the total to line 81.

\$ 1,182,315.00**Part 3: Accounts receivable****10. Does the debtor have any accounts receivable?**

- ☐ No. Go to Part 4.
- ☒ Yes. Fill in the information below.

Current value of debtor's interest**11. Accounts receivable**

11a. 90 days old or less: \$ 29,853,434.70 - \$ 0.00 = → \$ 29,853,434.70
face amount doubtful or uncollectible account

11b. Over 90 days old: \$ 37,434,122.32 - \$ 735,925.00 = → \$ 36,698,197.32
face amount doubtful or uncollectible account

12. Total of Part 3

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$ 66,551,632.02**Part 4: Investments****13. Does the debtor own any investments?**

- ☒ No. Go to Part 5.
- ☐ Yes. Fill in the information below.

**Valuation method
used for current value****Current value of debtor's
interest****14. Mutual funds or publicly traded stocks not included in Part 1**

Name of fund or stock

14.1. _____ \$ _____

14.2. _____ \$ _____

15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of entity:

% of ownership:

15.1. _____ % _____ \$ _____

15.2. _____ % _____ \$ _____

16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

16.1. _____ \$ _____

16.2. _____ \$ _____

17. Total of Part 4

Add lines 14 through 16. Copy the total to line 83.

\$ _____

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☒ No. Go to Part 6.
- ☐ Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. Raw materials				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
20. Work in progress				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
21. Finished goods, including goods held for resale				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
22. Other inventory or supplies				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____

23. Total of Part 5

Add lines 19 through 22. Copy the total to line 84.

\$ _____

24. Is any of the property listed in Part 5 perishable?

- ☐ No
- ☐ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- ☐ No
- ☐ Yes. Book value \$ _____ Valuation method _____ Current value \$ _____

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☐ No
- ☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.
- ☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
28. Crops—either planted or harvested			
_____	\$ _____	_____	\$ _____
29. Farm animals <i>Examples:</i> Livestock, poultry, farm-raised fish			
_____	\$ _____	_____	\$ _____
30. Farm machinery and equipment (Other than titled motor vehicles)			
_____	\$ _____	_____	\$ _____
31. Farm and fishing supplies, chemicals, and feed			
_____	\$ _____	_____	\$ _____
32. Other farming and fishing-related property not already listed in Part 6			
_____	\$ _____	_____	\$ _____

33. **Total of Part 6.**

Add lines 28 through 32. Copy the total to line 85.

\$ _____

34. **Is the debtor a member of an agricultural cooperative?**☐ No☐ Yes. Is any of the debtor's property stored at the cooperative?☐ No☐ Yes35. **Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?**☐ No☐ Yes. Book value \$ _____ Valuation method _____ Current value \$ _____36. **Is a depreciation schedule available for any of the property listed in Part 6?**☐ No☐ Yes37. **Has any of the property listed in Part 6 been appraised by a professional within the last year?**☐ No☐ Yes**Part 7: Office furniture, fixtures, and equipment; and collectibles**38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**☐ No. Go to Part 8.☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture			
See Attachment Part 7.39	\$ _____	_____	\$ _____ 0.00
40. Office fixtures			
See Attachment Part 7.40	\$ _____	_____	\$ _____ 2,099,180.00
41. Office equipment, including all computer equipment and communication systems equipment and software			
See Attachment Part 7.41	\$ _____	_____	\$ _____ 0.00
42. Collectibles <i>Examples:</i> Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			
42.1 _____	\$ _____	_____	\$ _____
42.2 _____	\$ _____	_____	\$ _____
42.3 _____	\$ _____	_____	\$ _____

43. **Total of Part 7.**

Add lines 39 through 42. Copy the total to line 86.

\$ _____ 2,099,180.00

44. **Is a depreciation schedule available for any of the property listed in Part 7?**☐ No☒ Yes45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**☒ No☐ Yes

Part 8: Machinery, equipment, and vehicles**46. Does the debtor own or lease any machinery, equipment, or vehicles?**

- ☐ No. Go to Part 9.
- ☒ Yes. Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1 See Attachment Part 8.47	\$		\$ 256.00
47.2	\$		\$
47.3	\$		\$
47.4	\$		\$
48. Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels			
48.1	\$		\$
48.2	\$		\$
49. Aircraft and accessories			
49.1	\$		\$
49.2	\$		\$
50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)			
See Attachment Part 8.50	\$		\$ 62,592.00
51. Total of Part 8. Add lines 47 through 50. Copy the total to line 87.			\$ 62,848.00

52. Is a depreciation schedule available for any of the property listed in Part 8?

- ☐ No
- ☒ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☒ No
- ☐ Yes

Part 9: Real property

54. Does the debtor own or lease any real property?

- ☐ No. Go to Part 10.
- ☒ Yes. Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1 See Attachment Part 9.55		\$		\$ Undetermined
55.2		\$		\$
55.3		\$		\$
55.4		\$		\$
55.5		\$		\$
55.6		\$		\$

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$ 0.00

57. Is a depreciation schedule available for any of the property listed in Part 9?

- ☒ No
- ☐ Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

- ☒ No
- ☐ Yes

Part 10: Intangibles and intellectual property

59. Does the debtor have any interests in intangibles or intellectual property?

- ☐ No. Go to Part 11.
- ☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets	\$		\$
61. Internet domain names and websites www.navillusinc.com	\$		\$ Undetermined
62. Licenses, franchises, and royalties	\$		\$
63. Customer lists, mailing lists, or other compilations	\$		\$
64. Other intangibles, or intellectual property	\$		\$
65. Goodwill	\$		\$

65. Total of Part 10.

Add lines 60 through 65. Copy the total to line 89.

\$ 0.00

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

- ☒ No
☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☒ No
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.
☒ Yes. Fill in the information below.

Current value of
debtor's interest

71. Notes receivable

Description (include name of obligor)

_____ \$ _____ - \$ _____ = → \$ _____
Total face amount doubtful or uncollectible amount

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

_____	Tax year _____	\$ _____
_____	Tax year _____	\$ _____
_____	Tax year _____	\$ _____

73. Interests in insurance policies or annuities

_____ \$ _____

74. Causes of action against third parties (whether or not a lawsuit has been filed)

See Global Notes _____

Nature of claim _____

Amount requested \$ _____

\$ _____ Undetermined

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

See Global Notes _____

Nature of claim _____

Amount requested \$ _____

\$ _____ Undetermined

76. Trusts, equitable or future interests in property

_____ \$ _____

77. Other property of any kind not already listed Examples: Season tickets, country club membership

Work In Progress - See Global Notes _____

_____ \$ _____ Undetermined

_____ \$ _____

78. Total of Part 11.

Add lines 71 through 77. Copy the total to line 90.

\$ _____ 0.00

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1.</i>	\$ 21,076,160.69	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$ 1,182,315.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$ 66,551,632.02	
83. Investments. <i>Copy line 17, Part 4.</i>	\$ 0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$ 0.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$ 0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$ 2,099,180.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$ 62,848.00	
88. Real property. <i>Copy line 56, Part 9.</i>	→	\$ 0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$ 0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$ 0.00	
91. Total. Add lines 80 through 90 for each column.....91a.	\$ 90,972,135.71	+ 91b. \$ 0.00
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.....	\$ 90,972,135.71	

Debtor: Navillus Tile, Inc.

Case Number: 17-13162 (SHL)

Attachment Part 1.3:

Checking, savings, money market, or financial brokerage accounts

	Name of institution (bank or brokerage Firm)	Type of account	Last 4 digits of account number	Current value of debtor's interest
3.1	Signature Bank	Main Account	1226	\$607.00
3.2	Signature Bank	Money Market Account	5539	\$2,523,437.00
3.3	Signature Bank	Payroll Account	7348	\$117,730.00
3.4	Signature Bank	Special Account	5155	\$6,768,287.00
3.5	Signature Bank	Operating Account	2395	(\$544,384.00)
3.6	Wall Street Access	Brokerage Cash Services	2886	\$3,166,557.59 ¹
3.7	Wells Fargo	Brokerage Cash Services	6454	\$754,102.93 ¹
3.8	Wells Fargo	Brokerage Cash Services	8855	\$1,836,942.07 ¹
3.9	Wells Fargo	Brokerage Cash Services	2615	\$2,340,474.63 ¹
3.10	Wells Fargo	Brokerage Cash Services	0593	\$1,857,502.97 ¹
3.11	Wells Fargo	Brokerage Cash Services	0544	\$2,254,903.50 ¹

¹ Current value as reflected on 10/31/17 account statement, the majority of the value consisting of invested securities.

\$21,076,160.69

Debtor: Navillus Tile, Inc.

Case Number: 17-13162 (SHL)

Attachment Part 2.7: Deposits, including security deposits and utility deposits

	Name of holder of deposit	Description of deposit	Current value of debtor's interest
7.1	633 Third Ave LLC	Office Lease Security Deposit	\$70,000.00
7.2	Con Ed	Utility Deposit	\$9,315.00
7.3	Halletts Building 4 SPE LLC	Yard Lease Security Deposit	\$50,000.00
7.4	Halletts Building 5 SPE LLC	Yard Lease Security Deposit	\$28,000.00
7.5	Kerry Leasing, LLC	Crane Deposit	\$1,000,000.00
			<u>\$1,157,315.00</u>

Debtor: Navillus Tile, Inc.

Case Number: 17-13162 (SHL)

Attachment Part 3.11:**Accounts receivable**

	Description	Face Amount	Doubtful or Uncollectible Account	Current Value of Debtor's Interest
11a.	90 days old or less:	\$29,853,434.70		\$29,853,434.70
11.b	Over 90 days old:	\$37,434,122.32	\$735,925.00	\$36,698,197.32

Note: Approximately \$32.5 million of the accounts receivable balances represent retainage, so the majority of receivables over 90 days old are not collectible until the related projects near completion per the terms of the governing contracts.

\$66,551,632.02

Debtor: Navillus Tile, Inc.

Case Number: 17-13162 (SHL)

Attachment Part 7.39:

Office Furniture

	Description	Original Cost Basis	Net Book Value of Debtor's Interest	Valuation Method Used for Current Value	Current value of debtor's interest
47.1	Office Furniture purchased in 2002	\$16,250.00	\$0.00	Straight-Line Depreciation	\$0.00
47.2	Office Furniture purchased in 2004	\$6,899.00	\$0.00	Straight-Line Depreciation	\$0.00
					<u>\$0.00</u>

Debtor: Navillus Tile, Inc.

Case Number: 17-13162 (SHL)

Attachment Part 7.40:

Office Fixtures

	Description	Original Cost Basis	Net Book Value of Debtor's Interest	Valuation Method Used for Current Value	Current value of debtor's interest
47.1	Leasehold Improvements - June 2015	\$1,473,500.00	\$1,227,916.00	Straight-Line Depreciation	\$1,227,916.00
47.2	Leasehold Improvements October 2015	\$200,052.00	\$171,473.00	Straight-Line Depreciation	\$171,473.00
47.3	Leasehold Improvements - December 2015	\$357,324.00	\$310,531.00	Straight-Line Depreciation	\$310,531.00
47.4	Leasehold Improvements - January 2016	\$144,851.00	\$125,882.00	Straight-Line Depreciation	\$125,882.00
47.5	Leasehold Improvements - March 2017	\$275,752.00	\$263,378.00	Straight-Line Depreciation	\$263,378.00
					<u>\$2,099,180.00</u>

Debtor: Navillus Tile, Inc.

Case Number: 17-13162 (SHL)

Attachment Part 7.41:

Office Equipment

	Description	Original Cost Basis	Net Book Value of Debtor's Interest	Valuation Method Used for Current Value	Current value of debtor's interest
47.1	Dell Computers purchased in 2002	\$16,331.00	\$0.00	Straight-Line Depreciation	\$0.00
47.2	Various Computers purchased in 2005	\$24,004.00	\$0.00	Straight-Line Depreciation	\$0.00
47.3	Dell Server purchased in 2005	\$10,555.00	\$0.00	Straight-Line Depreciation	\$0.00
47.4	Printer purchased in 2002	\$3,910.00	\$0.00	Straight-Line Depreciation	\$0.00
47.5	Timberline Software purchased in 2005	\$37,452.00	\$0.00	Straight-Line Depreciation	\$0.00
47.6	Timberline Software Modules purchased in 2005	\$7,586.00	\$0.00	Straight-Line Depreciation	\$0.00
					<u>\$0.00</u>

Debtor: **Navillus Tile, Inc.**

Case Number: **17-13162 (SHL)**

Attachment Part 8.47:

Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles

	Description	Original Cost Basis	Net Book Value of Debtor's Interest	Valuation Method Used for Current Value	Current value of debtor's interest
47.1	2001 Dodge Van	\$8,920.00	\$0.00	Straight-Line Depreciation	\$0.00
47.2	2002 GMC Savana	\$24,321.00	\$0.00	Straight-Line Depreciation	\$0.00
47.3	2003 Ford E-350	\$16,850.00	\$0.00	Straight-Line Depreciation	\$0.00
47.4	2005 GMC Savana	\$4,000.00	\$0.00	Straight-Line Depreciation	\$0.00
47.5	2005 Mitsubishi Galant	\$8,003.00	\$0.00	Straight-Line Depreciation	\$0.00
47.6	2006 Ford Ranger	\$7,963.00	\$0.00	Straight-Line Depreciation	\$0.00
47.7	2007 Ford F150	\$31,631.00	\$0.00	Straight-Line Depreciation	\$0.00
47.8	2007 Ford F150	\$25,976.00	\$0.00	Straight-Line Depreciation	\$0.00
47.9	2007 Sterling LT 9513	\$11,004.00	\$0.00	Straight-Line Depreciation	\$0.00
47.10	2007 Sterling LT 9513	\$115,330.00	\$0.00	Straight-Line Depreciation	\$0.00
47.11	2007 Sterling LT 9513	\$91,356.00	\$0.00	Straight-Line Depreciation	\$0.00
47.12	2008 Ford Truck Low Cab	\$47,455.00	\$0.00	Straight-Line Depreciation	\$0.00
47.13	2010 Chevy Express	\$19,598.00	\$0.00	Straight-Line Depreciation	\$0.00
47.14	2014 Mercedes E63SP	\$0.00	\$0.00		Leased
47.15	2015 Maserati Granturismo	\$0.00	\$0.00		Leased
47.16	2017 Mercedes GLS450W4	\$0.00	\$0.00		Leased
47.17	Crumsons Auto purchased in 2012	\$15,070.00	\$256.00	Straight-Line Depreciation	\$256.00
47.18	Crumsons Auto purchased in 2012	\$63,000.00	\$0.00	Straight-Line Depreciation	\$0.00
47.19	Hale Trailer	\$15,250.00	\$0.00	Straight-Line Depreciation	\$0.00
47.20	Truck purchased in 2008	\$9,462.00	\$0.00	Straight-Line Depreciation	\$0.00
47.21	Truck purchased in 2008	\$9,875.00	\$0.00	Straight-Line Depreciation	\$0.00

Debtor: Navillus Tile, Inc.

Case Number: 17-13162 (SHL)

Attachment Part 8.47:

Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles

	Description	Original Cost Basis	Net Book Value of Debtor's Interest	Valuation Method Used for Current Value	Current value of debtor's interest
47.22	Truck, Trailer and Forklifts purchased at 2005 auction	\$76,670.00	\$0.00	Straight-Line Depreciation	\$0.00
					<u>\$256.00</u>

Debtor: Navillus Tile, Inc.

Case Number: 17-13162 (SHL)

Attachment Part 8.50: Other Machinery, Fixtures and Equipment

	Description	Original Cost Basis	Net Book Value of Debtor's Interest	Valuation Method Used for Current Value	Current value of debtor's interest
47.1	Construction Equipment purchased in 2004	\$20,000.00	\$0.00	Straight-Line Depreciation	\$0.00
47.2	Construction Equipment purchased in 2006	\$34,061.00	\$0.00	Straight-Line Depreciation	\$0.00
47.3	Dunlap Master Climber Scaffolding	\$77,000.00	\$0.00	Straight-Line Depreciation	\$0.00
47.4	Forklift Model H80XM	\$33,488.00	\$0.00	Straight-Line Depreciation	\$0.00
47.5	Genie Articulating Boomlift	\$52,895.00	\$4,809.00	Straight-Line Depreciation	\$4,809.00
47.6	Genie Articulating Boomlift	\$52,895.00	\$4,809.00	Straight-Line Depreciation	\$4,809.00
47.7	Komatsu Dozer	\$75,447.00	\$0.00	Straight-Line Depreciation	\$0.00
47.8	Lull Telehandler Model 1044C-54	\$107,948.00	\$0.00	Straight-Line Depreciation	\$0.00
47.9	Manitou MRT-2540 Telehandler	\$137,326.00	\$13,464.00	Straight-Line Depreciation	\$13,464.00
47.10	Manitou Rotating Telescopic Handler	\$204,900.00	\$0.00	Straight-Line Depreciation	\$0.00
47.11	MRT Handler	\$197,074.00	\$0.00	Straight-Line Depreciation	\$0.00
47.12	MRT 2115 Telescopic Handler	\$194,785.00	\$0.00	Straight-Line Depreciation	\$0.00
47.13	MRT2150 Forklift	\$221,687.00	\$11,085.00	Straight-Line Depreciation	\$11,085.00
47.14	Office Trailer	\$5,000.00	\$0.00	Straight-Line Depreciation	\$0.00
47.15	Scaffold	\$41,599.00	\$0.00	Straight-Line Depreciation	\$0.00
47.16	Scissor Lift Model P15000	\$112,024.00	\$28,425.00	Straight-Line Depreciation	\$28,425.00
47.17	Tusk Forklift 600PD	\$29,088.00	\$0.00	Straight-Line Depreciation	\$0.00
47.18	Tusk Forklift 600PD	\$29,088.00	\$0.00	Straight-Line Depreciation	\$0.00
47.19	Var Reach Forklift Model 1044C-54	\$106,291.00	\$0.00	Straight-Line Depreciation	\$0.00
					<u>\$62,592.00</u>

Debtor: Navillus Tile, Inc.

Case Number: 17-13162 (SHL)

Attachment Part 9.55:

Any building, other improved real estate, or land in which the debtor has an interest

	Description and Location of Property	Nature and Extent of Debtor's Interest	Net Book Value of Debtor's Interest	Valuation method used for current value	Current value of debtor's interest
55.1	22-09 Queens Plaza North Long Island City, NY 11101 or 22-09 41st Avenue Long Island City, NY 11101	Yard & Warehouse Lease			Undetermined
55.2	27-02 1st Street Astoria, NY 11102	Building & Yard Lease			Undetermined
55.3	27-50 First Street Astoria, NY 11102	Yard Lease			Undetermined
					<u>Undetermined</u>

Fill in this information to identify the case:

Debtor name Navillus Tile, Inc.United States Bankruptcy Court for the: Southern District of New YorkCase number (If known): 17-13162 (SHL)☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.☒ Yes. Fill in all of the information below.**Part 1: List Creditors Who Have Secured Claims**

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A
Amount of claim
Do not deduct the value of collateral.Column B
Value of collateral that supports this claim**2.1** Creditor's nameA-1 WHOLESALE FENCE CO., INC

Describe debtor's property that is subject to a lien

Statutory Trust Funds

\$ 55,987.03\$ Undetermined

Creditor's mailing address

151-51 7TH AVENUE
WHITESTONE, NY 11357

Describe the lien

Article 3-A Claimant

Creditor's email address, if known

Is the creditor an insider or related party?

☒ No
☐ Yes.

Is anyone else liable on this claim?

☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☐ No
☒ Yes. Specify each creditor, including this creditor, and its relative priority.As of the petition filing date, the claim is:
Check all that apply.☒ Contingent
☐ Unliquidated
☐ Disputed**2.2** Creditor's nameA. ESTEBAN & COMPANY, INC.

Describe debtor's property that is subject to a lien

Statutory Trust Funds

\$ 609.61\$ Undetermined

Creditor's mailing address

132 WEST 36TH STREET
NEW YORK, NY 10018

Describe the lien

Article 3-A Claimant

Creditor's email address, if known

Is the creditor an insider or related party?

☒ No
☐ Yes.

Is anyone else liable on this claim?

☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☐ No
☒ Yes. Have you already specified the relative priority?☐ No. Specify each creditor, including this creditor, and its relative priority.As of the petition filing date, the claim is:
Check all that apply.☒ Contingent
☐ Unliquidated
☐ Disputed☐ Yes. The relative priority of creditors is specified on lines _____

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$ 15,071,100.16

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.3 Creditor's name

Describe debtor's property that is subject to a lien

AALCO TRANSPORT & STORAGE, INC

Statutory Trust Funds

\$ 82,850.00 \$ Undetermined

Creditor's mailing address

55 ENGINEERS LANE, #4
FARMINGDALE, NY 11735

Describe the lien

Article 3-A Claimant

Creditor's email address, if known

Is the creditor an insider or related party?

- ☒ No
☐ Yes

Date debt was incurred

Is anyone else liable on this claim?

Last 4 digits of account number

- ☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Do multiple creditors have an interest in the same property?

- ☐ No
☒ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is: Check all that apply.

- ☒ Contingent
☐ Unliquidated
☐ Disputed

- ☐ Yes. The relative priority of creditors is specified on lines _____

2.4 Creditor's name

Describe debtor's property that is subject to a lien

ACCURATE PRECAST CORPORATION

Statutory Trust Funds

\$ 84,650.00 \$ Undetermined

Creditor's mailing address

1957 PITKIN AVENUE
BROOKLYN, NY 11207

Describe the lien

Article 3-A Claimant

Creditor's email address, if known

Is the creditor an insider or related party?

- ☒ No
☐ Yes

Date debt was incurred

Is anyone else liable on this claim?

Last 4 digits of account number

- ☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Do multiple creditors have an interest in the same property?

- ☐ No
☒ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is: Check all that apply.

- ☒ Contingent
☐ Unliquidated
☐ Disputed

- ☐ Yes. The relative priority of creditors is specified on lines _____

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.5 Creditor's name

Describe debtor's property that is subject to a lien

ACS SYSTEM ASSOCAITES, INC.

Statutory Trust Funds

\$ 384,198.75 \$ Undetermined

Creditor's mailing address

160 W. LINCOLN AVENUE
MOUNT VERNON, NY 10550

Describe the lien

Article 3-A Claimant

Creditor's email address, if known

Is the creditor an insider or related party?

- ☒ No
☐ Yes

Date debt was incurred

Is anyone else liable on this claim?

Last 4 digits of account number

- ☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Do multiple creditors have an interest in the same property?

- ☐ No
☒ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is: Check all that apply.

- ☒ Contingent
☐ Unliquidated
☐ Disputed

- ☐ Yes. The relative priority of creditors is specified on lines _____

2.6 Creditor's name

Describe debtor's property that is subject to a lien

ADVANCED READY MIX CORP

Statutory Trust Funds

\$ 103,434.95 \$ Undetermined

Creditor's mailing address

P.O. BOX 733
BROOKLYN, NY 11237

Describe the lien

Article 3-A Claimant

Creditor's email address, if known

Is the creditor an insider or related party?

- ☒ No
☐ Yes

Date debt was incurred

Is anyone else liable on this claim?

Last 4 digits of account number

- ☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Do multiple creditors have an interest in the same property?

- ☐ No
☒ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is: Check all that apply.

- ☒ Contingent
☐ Unliquidated
☐ Disputed

- ☐ Yes. The relative priority of creditors is specified on lines _____

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.7 Creditor's name

Describe debtor's property that is subject to a lien

AHERN RENTALS

Statutory Trust Funds

\$ 747.36 \$ Undetermined

Creditor's mailing address

1333 RANDALL AVE
BRONX, NY 10474

Describe the lien

Article 3-A Claimant

Creditor's email address, if known

Is the creditor an insider or related party?

- ☒ No
☐ Yes

Date debt was incurred

Is anyone else liable on this claim?

Last 4 digits of account number

- ☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Do multiple creditors have an interest in the same property?

- ☐ No
☒ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is: Check all that apply.

- ☒ Contingent
☐ Unliquidated
☐ Disputed

- ☐ Yes. The relative priority of creditors is specified on lines _____

2.8 Creditor's name

Describe debtor's property that is subject to a lien

AIR MASTERS INC.

Statutory Trust Funds

\$ 32,890.00 \$ Undetermined

Creditor's mailing address

1933 RICHMOND TERRACE
STATEN ISLAND, NY 10302

Describe the lien

Article 3-A Claimant

Creditor's email address, if known

Is the creditor an insider or related party?

- ☒ No
☐ Yes

Date debt was incurred

Is anyone else liable on this claim?

Last 4 digits of account number

- ☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Do multiple creditors have an interest in the same property?

- ☐ No
☒ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is: Check all that apply.

- ☒ Contingent
☐ Unliquidated
☐ Disputed

- ☐ Yes. The relative priority of creditors is specified on lines _____

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.9 Creditor's name

Describe debtor's property that is subject to a lien

ALL AMERICAN MASON SUPPLY

Statutory Trust Funds

\$ 6,326.74 \$ Undetermined

Creditor's mailing address

14105 109TH AVE
JAMAICA, NY 11435

Describe the lien

Article 3-A Claimant

Creditor's email address, if known

Is the creditor an insider or related party?

- ☒ No
☐ Yes

Date debt was incurred

Is anyone else liable on this claim?

Last 4 digits of account number

- ☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Do multiple creditors have an interest in the same property?

- ☐ No
☒ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is: Check all that apply.

- ☒ Contingent
☐ Unliquidated
☐ Disputed

- ☐ Yes. The relative priority of creditors is specified on lines _____

2.10 Creditor's name

Describe debtor's property that is subject to a lien

ALL BORO INC.

Statutory Trust Funds

\$ 1,140.37 \$ Undetermined

Creditor's mailing address

42 MAPLE PL
AMITYVILLE, NY 11701

Describe the lien

Article 3-A Claimant

Creditor's email address, if known

Is the creditor an insider or related party?

- ☒ No
☐ Yes

Date debt was incurred

Is anyone else liable on this claim?

Last 4 digits of account number

- ☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Do multiple creditors have an interest in the same property?

- ☐ No
☒ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is: Check all that apply.

- ☒ Contingent
☐ Unliquidated
☐ Disputed

- ☐ Yes. The relative priority of creditors is specified on lines _____

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.11 Creditor's name <u>ALLIED BUILDING PRODUCTS CORP.</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>50,560.83</u> \$ <u>Undetermined</u>
Creditor's mailing address 42-16 11TH STREET LONG ISLAND CITY, NY 11101	
Creditor's email address, if known _____	Describe the lien <u>Article 3-A Claimant</u>
Date debt was incurred _____ Last 4 digits of account number _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed

2.12 Creditor's name <u>ALMADINA ENTERPRISES, INC.</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>13,075.00</u> \$ <u>Undetermined</u>
Creditor's mailing address 51-24 35TH STREET L.I.C., NY 11101	
Creditor's email address, if known _____	Describe the lien <u>Article 3-A Claimant</u>
Date debt was incurred _____ Last 4 digits of account number _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.13 Creditor's name

Describe debtor's property that is subject to a lien

ALPHA CARE SUPPLY

Statutory Trust Funds

\$ 18,900.00 \$ Undetermined

Creditor's mailing address

21 STRINGHAM AVE.
VALLEY STREAM, NY 11580

Describe the lien

Article 3-A Claimant

Creditor's email address, if known

Is the creditor an insider or related party?

- ☒ No
☐ Yes

Date debt was incurred

Is anyone else liable on this claim?

Last 4 digits of account number

- ☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Do multiple creditors have an interest in the same property?

- ☐ No
☒ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is: Check all that apply.

- ☒ Contingent
☐ Unliquidated
☐ Disputed

- ☐ Yes. The relative priority of creditors is specified on lines _____

2.14 Creditor's name

Describe debtor's property that is subject to a lien

ALUMA SYSTEMS

Statutory Trust Funds

\$ 34,305.61 \$ Undetermined

Creditor's mailing address

P.O. BOX 91473
CHICAGO, IL 60693

Describe the lien

Article 3-A Claimant

Creditor's email address, if known

Is the creditor an insider or related party?

- ☒ No
☐ Yes

Date debt was incurred

Is anyone else liable on this claim?

Last 4 digits of account number

- ☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Do multiple creditors have an interest in the same property?

- ☐ No
☒ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is: Check all that apply.

- ☒ Contingent
☐ Unliquidated
☐ Disputed

- ☐ Yes. The relative priority of creditors is specified on lines _____

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value of collateral.

Column B

Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.15 Creditor's name**Describe debtor's property that is subject to a lien**

AMERICAN ANALYTICAL LAB., LLC.

Statutory Trust Funds

\$ 1,450.00

\$ Undetermined

Creditor's mailing address56 TOLEDO STREET
FARMINGDALE, NY 11735**Describe the lien**

Article 3-A Claimant

Creditor's email address, if known**Is the creditor an insider or related party?**

- ☒
- No
-
- ☐
- Yes

Date debt was incurred**Is anyone else liable on this claim?****Last 4 digits of account number**

- ☒
- No
-
- ☐
- Yes. Fill out
- Schedule H: Codebtors*
- (Official Form 206H).

Do multiple creditors have an interest in the same property?

- ☐
- No
-
- ☒
- Yes. Have you already specified the relative priority?
-
- ☐
- No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is: Check all that apply.

- ☒
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

- ☐
- Yes. The relative priority of creditors is specified on lines _____

2.16 Creditor's name**Describe debtor's property that is subject to a lien**

AMERICAN ELITE CONTRACTING COR

Statutory Trust Funds

\$ 1,680.00

\$ Undetermined

Creditor's mailing address81 E. JEFFRYN BLVD, SUITE F
DEER PARK, NY 11729**Describe the lien**

Article 3-A Claimant

Creditor's email address, if known**Is the creditor an insider or related party?**

- ☒
- No
-
- ☐
- Yes

Date debt was incurred**Is anyone else liable on this claim?****Last 4 digits of account number**

- ☒
- No
-
- ☐
- Yes. Fill out
- Schedule H: Codebtors*
- (Official Form 206H).

Do multiple creditors have an interest in the same property?

- ☐
- No
-
- ☒
- Yes. Have you already specified the relative priority?
-
- ☐
- No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is: Check all that apply.

- ☒
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

- ☐
- Yes. The relative priority of creditors is specified on lines _____

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.17 Creditor's name <u>AMERICAN OLEAN</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>10,349.76</u> \$ <u>Undetermined</u>
Creditor's mailing address LOCKBOX #9237 P.O. BOX 8500 PHILADELPHIA, PA 19178	
Creditor's email address, if known _____	Describe the lien <u>Article 3-A Claimant</u>
Date debt was incurred _____ Last 4 digits of account number _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed

2.18 Creditor's name <u>ANCHOR CONCRETE PRODUCTS, INC</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>77,625.67</u> \$ <u>Undetermined</u>
Creditor's mailing address P.O. BOX 281479 ATLANTA, GA 30384-1479	
Creditor's email address, if known _____	Describe the lien <u>Article 3-A Claimant</u>
Date debt was incurred _____ Last 4 digits of account number _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.19 Creditor's name

Describe debtor's property that is subject to a lien

ARMSTRONG ROOFING CORP

Statutory Trust Funds

\$ 42,759.00 \$ Undetermined

Creditor's mailing address

2343 HYLAN BLVD.
STATEN ISLAND, NY 10306

Describe the lien

Article 3-A Claimant

Creditor's email address, if known

Is the creditor an insider or related party?

- ☒ No
☐ Yes

Date debt was incurred

Is anyone else liable on this claim?

Last 4 digits of account number

- ☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Do multiple creditors have an interest in the same property?

- ☐ No
☒ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is: Check all that apply.

- ☒ Contingent
☐ Unliquidated
☐ Disputed

- ☐ Yes. The relative priority of creditors is specified on lines _____

2.20 Creditor's name

Describe debtor's property that is subject to a lien

ARTEMIS PLUMBING & HEATING, INC

Statutory Trust Funds

\$ 20,000.00 \$ Undetermined

Creditor's mailing address

19-03 75TH STREET
EAST ELMHURST, NY 11370

Describe the lien

Article 3-A Claimant

Creditor's email address, if known

Is the creditor an insider or related party?

- ☒ No
☐ Yes

Date debt was incurred

Is anyone else liable on this claim?

Last 4 digits of account number

- ☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Do multiple creditors have an interest in the same property?

- ☐ No
☒ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is: Check all that apply.

- ☒ Contingent
☐ Unliquidated
☐ Disputed

- ☐ Yes. The relative priority of creditors is specified on lines _____

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.21 Creditor's name

Describe debtor's property that is subject to a lien

ASSESSMENT RESOURCES & TECH

Statutory Trust Funds

\$ 500.00 \$ Undetermined

Creditor's mailing address

111 JOHN STREET
SUITE 538
NEW YORK, NY 10038

Describe the lien

Article 3-A Claimant

Creditor's email address, if known

Is the creditor an insider or related party?

- ☒ No
☐ Yes

Date debt was incurred

Is anyone else liable on this claim?

Last 4 digits of account number

- ☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Do multiple creditors have an interest in the same property?

- ☐ No
☒ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is: Check all that apply.

- ☒ Contingent
☐ Unliquidated
☐ Disputed

- ☐ Yes. The relative priority of creditors is specified on lines _____

2.22 Creditor's name

Describe debtor's property that is subject to a lien

ATLAS BUILDING CONSULTANTS

Statutory Trust Funds

\$ 28,550.00 \$ Undetermined

Creditor's mailing address

122 MILLER AVENUE
BROOKLYN, NY 11207

Describe the lien

Article 3-A Claimant

Creditor's email address, if known

Is the creditor an insider or related party?

- ☒ No
☐ Yes

Date debt was incurred

Is anyone else liable on this claim?

Last 4 digits of account number

- ☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Do multiple creditors have an interest in the same property?

- ☐ No
☒ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is: Check all that apply.

- ☒ Contingent
☐ Unliquidated
☐ Disputed

- ☐ Yes. The relative priority of creditors is specified on lines _____

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.23	Creditor's name <u>AWISCO NY CORP</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>13,537.57</u>	\$ <u>Undetermined</u>
Creditor's mailing address 55-15 43RD. STREET MASPETH, NY 11378			
Creditor's email address, if known _____			
Date debt was incurred _____ Last 4 digits of account number _____			
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien <u>Article 3-A Claimant</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
2.24	Creditor's name <u>BACO ENTERPRISES</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>1,711.00</u>	\$ <u>Undetermined</u>
Creditor's mailing address ATTN BARRY COHEN PO BOX 740487 BRONX, NY 10474			
Creditor's email address, if known _____			
Date debt was incurred _____ Last 4 digits of account number _____			
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien <u>Article 3-A Claimant</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.25 Creditor's name <u>BARKER STEEL LLC</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>236,638.43</u> \$ <u>Undetermined</u>
Creditor's mailing address 55 SUMNER STREET MILFORD, MA 01757	
Creditor's email address, if known _____	Describe the lien <u>Article 3-A Claimant</u>
Date debt was incurred _____ Last 4 digits of account number _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).
<input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed

2.26 Creditor's name <u>BERRY-ROCHI, INC.</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>7,350.00</u> \$ <u>Undetermined</u>
Creditor's mailing address 76 E MAIN ST HUNTINGTON, NY 11743	
Creditor's email address, if known _____	Describe the lien <u>Article 3-A Claimant</u>
Date debt was incurred _____ Last 4 digits of account number _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).
<input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.27 Creditor's name BEST CONCRETE MIX CORP. Creditor's mailing address 35-10 COLLEGE POINT BLVD FLUSHING, NY 11354 Creditor's email address, if known Date debt was incurred _____ Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ 25,049.96 \$ Undetermined Describe the lien Article 3-A Claimant Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
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2.28 Creditor's name BILCO WIRE ROPE Creditor's mailing address 1285 CENTRAL AVE HILLSIDE, NJ 07205 Creditor's email address, if known Date debt was incurred _____ Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ 2,160.00 \$ Undetermined Describe the lien Article 3-A Claimant Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
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Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.29	Creditor's name BLANKE CORPORATION	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 60,739.83	\$ Undetermined
Creditor's mailing address 3631 CLEARVIEW PARKWAY ATLANTA, GA 30340				
Creditor's email address, if known 				
Date debt was incurred _____ Last 4 digits of account number _____				
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien Article 3-A Claimant Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
2.30	Creditor's name BLOOD HOUND INC.,	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 15,422.50	\$ Undetermined
Creditor's mailing address 750 PATRICK PL., STE. B BROWNSBURG, IN 46112				
Creditor's email address, if known 				
Date debt was incurred _____ Last 4 digits of account number _____				
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien Article 3-A Claimant Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.31	Creditor's name <u>BOIARDI PRODUCTS</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>10,779.78</u> \$ <u>Undetermined</u>
	Creditor's mailing address 13 FAIRFIELD AVE # 106 LITTLE FALLS, NJ 07424	
	Creditor's email address, if known _____	Describe the lien <u>Article 3-A Claimant</u>
	Date debt was incurred _____ Last 4 digits of account number _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).
	Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
2.32	Creditor's name <u>BRACCI LUMBER & HARDWARE</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>14,262.38</u> \$ <u>Undetermined</u>
	Creditor's mailing address 1440 UTICA AVENUE BROOKLYN, NY 11203	
	Creditor's email address, if known _____	Describe the lien <u>Article 3-A Claimant</u>
	Date debt was incurred _____ Last 4 digits of account number _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).
	Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.33 Creditor's name

Describe debtor's property that is subject to a lien

BRANCH RIVER PLASTICS, INC.

Statutory Trust Funds

\$ 11,959.20 \$ Undetermined

Creditor's mailing address

15 THURBER BLVD
SMITHFIELD, RI 02917

Describe the lien

Article 3-A Claimant

Creditor's email address, if known

Is the creditor an insider or related party?

- ☒ No
☐ Yes

Date debt was incurred

Is anyone else liable on this claim?

Last 4 digits of account number

- ☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Do multiple creditors have an interest in the same property?

- ☐ No
☒ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is: Check all that apply.

- ☒ Contingent
☐ Unliquidated
☐ Disputed

- ☐ Yes. The relative priority of creditors is specified on lines _____

2.34 Creditor's name

Describe debtor's property that is subject to a lien

BREEZY POINT LUMBER CO., INC.

Statutory Trust Funds

\$ 23,864.62 \$ Undetermined

Creditor's mailing address

28 MARKET STREET
BREEZY POINT, NY 11697

Describe the lien

Article 3-A Claimant

Creditor's email address, if known

Is the creditor an insider or related party?

- ☒ No
☐ Yes

Date debt was incurred

Is anyone else liable on this claim?

Last 4 digits of account number

- ☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Do multiple creditors have an interest in the same property?

- ☐ No
☒ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is: Check all that apply.

- ☒ Contingent
☐ Unliquidated
☐ Disputed

- ☐ Yes. The relative priority of creditors is specified on lines _____

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.35 Creditor's name <u>BROWN BUILDERS SUPPLY</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>1,026.34</u> \$ <u>Undetermined</u>
Creditor's mailing address 1700 PLAZA AVE NEW HYDE PARK, NY 11040	
Creditor's email address, if known _____	Describe the lien <u>Article 3-A Claimant</u>
Date debt was incurred _____ Last 4 digits of account number _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).
	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
2.36 Creditor's name <u>BU L&B BUILDING SUPPLY</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>42,080.19</u> \$ <u>Undetermined</u>
Creditor's mailing address 148-23 94TH AVE JAMAICA, NY 11435	
Creditor's email address, if known _____	Describe the lien <u>Article 3-A Claimant</u>
Date debt was incurred _____ Last 4 digits of account number _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).
	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.37 Creditor's name <u>BURTON PLUMBING SUPPLY</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>1,066.98</u> \$ <u>Undetermined</u>
Creditor's mailing address 7014 GRAND AVE MASPETH, NY 11378	
Creditor's email address, if known _____	Describe the lien <u>Article 3-A Claimant</u>
Date debt was incurred _____ Last 4 digits of account number _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).
<input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed

2.38 Creditor's name <u>CALL A HEAD</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>1,031.99</u> \$ <u>Undetermined</u>
Creditor's mailing address 304 CROSSBAY BLVD. BROAD CHANNEL, NY 11693	
Creditor's email address, if known _____	Describe the lien <u>Article 3-A Claimant</u>
Date debt was incurred _____ Last 4 digits of account number _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).
<input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.39	Creditor's name CARDELLA WASTE	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 25,378.00	\$ Undetermined
Creditor's mailing address P.O. BOX 1085 BRATTLEBORO, VT 05302-1085				
Creditor's email address, if known 				
Date debt was incurred _____ Last 4 digits of account number _____				
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien Article 3-A Claimant Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

2.40	Creditor's name CARTER MILCHMAN & FRANK	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 2,358.11	\$ Undetermined
Creditor's mailing address 28-10 37TH AVE LONG ISLAND CITY, NY 11101				
Creditor's email address, if known 				
Date debt was incurred _____ Last 4 digits of account number _____				
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien Article 3-A Claimant Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.41 Creditor's name CASA REDIMIX CONCRETE CORP. Creditor's mailing address 886 EDGEWATER ROAD BRONX, NY 10474 Creditor's email address, if known Date debt was incurred _____ Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ 11,809.91 \$ Undetermined Describe the lien Article 3-A Claimant Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
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2.42 Creditor's name CENTRON ENTERPRISES LLC Creditor's mailing address 115 MOUNTAIN AVE WESTFIELD, NJ 07090 Creditor's email address, if known Date debt was incurred _____ Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ 18,870.00 \$ Undetermined Describe the lien Article 3-A Claimant Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
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Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.43 Creditor's name

Describe debtor's property that is subject to a lien

CENTURY INDUSTRIAL & BEARING

Statutory Trust Funds

\$ 270.10 \$ Undetermined

Creditor's mailing address

26-27 JACKSON AVENUE
LONG ISLAND CITY, NY 11101

Describe the lien

Article 3-A Claimant

Creditor's email address, if known

Is the creditor an insider or related party?

- ☒ No
☐ Yes

Date debt was incurred

Is anyone else liable on this claim?

Last 4 digits of account number

- ☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Do multiple creditors have an interest in the same property?

- ☐ No
☒ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is: Check all that apply.

- ☒ Contingent
☐ Unliquidated
☐ Disputed

- ☐ Yes. The relative priority of creditors is specified on lines _____

2.44 Creditor's name

Describe debtor's property that is subject to a lien

CENTURY PETROLEUM LTD.

Statutory Trust Funds

\$ 19,922.25 \$ Undetermined

Creditor's mailing address

147 GAZZA BLVD.
FARMINGDALE, NY 11735

Describe the lien

Article 3-A Claimant

Creditor's email address, if known

Is the creditor an insider or related party?

- ☒ No
☐ Yes

Date debt was incurred

Is anyone else liable on this claim?

Last 4 digits of account number

- ☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Do multiple creditors have an interest in the same property?

- ☐ No
☒ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is: Check all that apply.

- ☒ Contingent
☐ Unliquidated
☐ Disputed

- ☐ Yes. The relative priority of creditors is specified on lines _____

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.45	Creditor's name <u>CERAMIC TECHNICS LTD</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ <u>61,743.26</u>	\$ <u>Undetermined</u>
Creditor's mailing address 1298 OLD ALPHARETTA ROAD ALPHARETTA, GA 30005				
Creditor's email address, if known _____				
Date debt was incurred _____				
Last 4 digits of account number _____				
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.		Describe the lien <u>Article 3-A Claimant</u>		
		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
		<input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		

2.46	Creditor's name <u>CERCO PRODUCTS</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ <u>4,485.67</u>	\$ <u>Undetermined</u>
Creditor's mailing address 80 SHERWOOD AVENUE FARMINGDALE, NY 11735				
Creditor's email address, if known _____				
Date debt was incurred _____				
Last 4 digits of account number _____				
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.		Describe the lien <u>Article 3-A Claimant</u>		
		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
		<input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.47 Creditor's name

Describe debtor's property that is subject to a lien

CHAMPION INT. CONSTRUCTION CO.

Statutory Trust Funds

\$ 60,000.00 \$ Undetermined

Creditor's mailing address

1925 RICHMOND TER
STATEN ISLAND, NY 10302-1217

Describe the lien

Article 3-A Claimant

Creditor's email address, if known

Is the creditor an insider or related party?

- ☒ No
☐ Yes

Date debt was incurred

Is anyone else liable on this claim?

Last 4 digits of account number

- ☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Do multiple creditors have an interest in the same property?

- ☐ No
☒ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is: Check all that apply.

- ☒ Contingent
☐ Unliquidated
☐ Disputed

- ☐ Yes. The relative priority of creditors is specified on lines _____

2.48 Creditor's name

Describe debtor's property that is subject to a lien

CITY TRANSIT MIX

Statutory Trust Funds

\$ 4,833.50 \$ Undetermined

Creditor's mailing address

10414 148TH ST
JAMAICA, NY 11435

Describe the lien

Article 3-A Claimant

Creditor's email address, if known

Is the creditor an insider or related party?

- ☒ No
☐ Yes

Date debt was incurred

Is anyone else liable on this claim?

Last 4 digits of account number

- ☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Do multiple creditors have an interest in the same property?

- ☐ No
☒ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is: Check all that apply.

- ☒ Contingent
☐ Unliquidated
☐ Disputed

- ☐ Yes. The relative priority of creditors is specified on lines _____

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.49	Creditor's name CLEARVIEW SHEET METAL	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 9,697.51	\$ Undetermined
Creditor's mailing address 199 BUSH STREET BROOKLYN, NY 11231				
Creditor's email address, if known 				
Date debt was incurred _____				
Last 4 digits of account number _____				
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien Article 3-A Claimant Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

2.50	Creditor's name CO K.R.J. CONSULTING	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 7,416.00	\$ Undetermined
Creditor's mailing address 5301 N TRENHOLM RD A COLUMBIA, SC 29206				
Creditor's email address, if known 				
Date debt was incurred _____				
Last 4 digits of account number _____				
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien Article 3-A Claimant Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.51	Creditor's name COLLINS BUILDING SERVICES, INC	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 2,329.93	\$ Undetermined
Creditor's mailing address 24-01 44TH ROAD, 15TH FL LONG ISLAND CITY, NY 11101				
Creditor's email address, if known 				
Date debt was incurred _____ Last 4 digits of account number _____				
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien Article 3-A Claimant Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
2.52	Creditor's name COLONY HARDWARE CORP.	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 28,040.00	\$ Undetermined
Creditor's mailing address 1049 ZEREGA AVENUE BRONX, NY 10462				
Creditor's email address, if known 				
Date debt was incurred _____ Last 4 digits of account number _____				
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien Article 3-A Claimant Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.53 Creditor's name <u>CONSERVE LIGHTING & ELECTRICAL</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>216.12</u> \$ <u>Undetermined</u>
Creditor's mailing address 3905 CRESCENT ST LONG ISLAND CITY, NY 11101	Describe the lien <u>Article 3-A Claimant</u>
Creditor's email address, if known _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Date debt was incurred _____ Last 4 digits of account number _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed

2.54 Creditor's name <u>CONSOLIDATED BRICK & BUILDING</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>16,318.50</u> \$ <u>Undetermined</u>
Creditor's mailing address 127 W 24TH ST, #3 NEW YORK, NY 10011	Describe the lien <u>Article 3-A Claimant</u>
Creditor's email address, if known _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Date debt was incurred _____ Last 4 digits of account number _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.55 Creditor's name

Describe debtor's property that is subject to a lien

CORINTHIAN CAST STONE, INC

Statutory Trust Funds

\$ 4,863.09 \$ Undetermined

Creditor's mailing address

115 WYANDANCH AVENUE
WYANDANCH, NY 11798

Describe the lien

Article 3-A Claimant

Creditor's email address, if known

Is the creditor an insider or related party?

- ☒ No
☐ Yes

Date debt was incurred

Is anyone else liable on this claim?

Last 4 digits of account number

- ☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Do multiple creditors have an interest in the same property?

- ☐ No
☒ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is: Check all that apply.

- ☒ Contingent
☐ Unliquidated
☐ Disputed

- ☐ Yes. The relative priority of creditors is specified on lines _____

2.56 Creditor's name

Describe debtor's property that is subject to a lien

CORNERSTONE CARPENTRY LIMITED

Statutory Trust Funds

\$ 37,144.92 \$ Undetermined

Creditor's mailing address

15 WESTMORELAND DR.
YONKERS, NY 10704

Describe the lien

Article 3-A Claimant

Creditor's email address, if known

Is the creditor an insider or related party?

- ☒ No
☐ Yes

Date debt was incurred

Is anyone else liable on this claim?

Last 4 digits of account number

- ☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Do multiple creditors have an interest in the same property?

- ☐ No
☒ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is: Check all that apply.

- ☒ Contingent
☐ Unliquidated
☐ Disputed

- ☐ Yes. The relative priority of creditors is specified on lines _____

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.57 Creditor's name DALTILE	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 58,937.76	\$ Undetermined
Creditor's mailing address 58-40 55TH DRIVE MASPETH, NY 11378	Describe the lien Article 3-A Claimant		
Creditor's email address, if known 	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Date debt was incurred 	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
Last 4 digits of account number _ _ _ _	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _ _ _ _			

2.58 Creditor's name DDS MECHANICAL	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 2,750.00	\$ Undetermined
Creditor's mailing address 38-32 54TH STREET WOODSIDE, NY 11377	Describe the lien Article 3-A Claimant		
Creditor's email address, if known 	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Date debt was incurred 	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
Last 4 digits of account number _ _ _ _	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _ _ _ _			

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.59	Creditor's name <u>DE LAGE LANDEN FINANCIAL SERVICES, INC.</u>	Describe debtor's property that is subject to a lien Two New Genie Z8060 Boom Lifts \$ <u>Undetermined</u>	\$ <u>Undetermined</u>
Creditor's mailing address 1111 OLD EAGLE SCHOOL RD WAYNE, PA 19087			
Creditor's email address, if known _____			
Date debt was incurred _____ Last 4 digits of account number _____			
Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien <u>UCC Lien</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
2.60	Creditor's name <u>DEAN RESTORATION, INC.</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>14,750.00</u>	\$ <u>Undetermined</u>
Creditor's mailing address 216 HAMDEN AVE STATEN ISLAND, NY 10306			
Creditor's email address, if known _____			
Date debt was incurred _____ Last 4 digits of account number _____			
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien <u>Article 3-A Claimant</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.61	Creditor's name DEI Creditor's mailing address 151 21ST STREET BROOKLYN, NY 11232 Creditor's email address, if known Date debt was incurred _____ Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ 1,166,503.26 \$ Undetermined Describe the lien Article 3-A Claimant Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
2.62	Creditor's name DOKA USA, LTD. Creditor's mailing address 214 GATES ROAD LITTLE FERRY, NJ 07643 Creditor's email address, if known Date debt was incurred _____ Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ 689,205.73 \$ Undetermined Describe the lien Article 3-A Claimant Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value of collateral.

Column B

Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.63 Creditor's name

Describe debtor's property that is subject to a lien

DONALD VAN GERVE, PE

Statutory Trust Funds

\$ 8,050.00

\$ Undetermined

Creditor's mailing address

5 BRIDGEHAMPTON CROSSING
UNIONVILLE, CT 06085

Describe the lien

Article 3-A Claimant

Creditor's email address, if known

Is the creditor an insider or related party?

- ☒ No
☐ Yes

Date debt was incurred

Is anyone else liable on this claim?

Last 4 digits of account number

- ☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Do multiple creditors have an interest in the same property?

- ☐ No
☒ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is: Check all that apply.

- ☒ Contingent
☐ Unliquidated
☐ Disputed

- ☐ Yes. The relative priority of creditors is specified on lines _____

2.64 Creditor's name

Describe debtor's property that is subject to a lien

E. FITZGERALD ELECTRIC CO

Statutory Trust Funds

\$ 567,190.09

\$ Undetermined

Creditor's mailing address

633 3RD AVENUE, 17TH FLOOR
NEW YORK, NY 10017

Describe the lien

Article 3-A Claimant

Creditor's email address, if known

Is the creditor an insider or related party?

- ☐ No
☒ Yes

Date debt was incurred

Is anyone else liable on this claim?

Last 4 digits of account number

- ☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Do multiple creditors have an interest in the same property?

- ☐ No
☒ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is: Check all that apply.

- ☒ Contingent
☐ Unliquidated
☐ Disputed

- ☐ Yes. The relative priority of creditors is specified on lines _____

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.65	Creditor's name <u>EAGLE ONE ROOFING</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>418.88</u>	\$ <u>Undetermined</u>
Creditor's mailing address 1860 45TH ST LONG ISLAND CITY, NY 11105		Describe the lien <u>Article 3-A Claimant</u>	
Creditor's email address, if known _____		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Date debt was incurred _____ Last 4 digits of account number _____		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).	
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	

2.66	Creditor's name <u>EAGLE SCAFFOLDING</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>7,579.19</u>	\$ <u>Undetermined</u>
Creditor's mailing address 67 MILL STREET AMITYVILLE, NY 11701		Describe the lien <u>Article 3-A Claimant</u>	
Creditor's email address, if known _____		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Date debt was incurred _____ Last 4 digits of account number _____		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).	
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.67	Creditor's name <u>ECOLSCIENCES, INC.</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>2,500.00</u>	\$ <u>Undetermined</u>
Creditor's mailing address 75 FLEETWOOD DRIVE, SUITE 250 ROCKAWAY, NJ 07866			
Creditor's email address, if known _____		Describe the lien <u>Article 3-A Claimant</u>	
Date debt was incurred _____		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number _____		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).	
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
<input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____			

2.68	Creditor's name <u>ENGINEERED DEVICES CORP.</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>231,327.54</u>	\$ <u>Undetermined</u>
Creditor's mailing address 25 BERGEN TURNPIKE RIDGEFIELD PARK, NJ 07660			
Creditor's email address, if known _____		Describe the lien <u>Article 3-A Claimant</u>	
Date debt was incurred _____		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number _____		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).	
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
<input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____			

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.69 Creditor's name EOC-NY	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 850.00	\$ Undetermined
Creditor's mailing address 1811 STILLWELL AVENUE SUITE 4 BROOKLYN, NY 11223	Describe the lien Article 3-A Claimant		
Creditor's email address, if known 	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Date debt was incurred _____ Last 4 digits of account number _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

2.70 Creditor's name ETS CONTRACTING, INC.	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 219,760.85	\$ Undetermined
Creditor's mailing address 160 CLAY STREET BROOKLYN, NY 11222	Describe the lien Article 3-A Claimant		
Creditor's email address, if known 	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Date debt was incurred _____ Last 4 digits of account number _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.71 Creditor's name FELDMAN LUMBER	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 126,655.57	\$ Undetermined
Creditor's mailing address 1281 METROPOLITAN AVENUE BROOKLYN, NY 11237	Describe the lien Article 3-A Claimant		
Creditor's email address, if known 	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Date debt was incurred _____ Last 4 digits of account number _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

2.72 Creditor's name FERRARA BROS	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 571,041.79	\$ Undetermined
Creditor's mailing address P.O. BOX 419248 BOSTON, MA 02241-9248	Describe the lien Article 3-A Claimant		
Creditor's email address, if known 	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Date debt was incurred _____ Last 4 digits of account number _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.73	Creditor's name FERRARA LUMBER CORPORATION	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 30,610.43	\$ Undetermined
Creditor's mailing address 56-30 49TH STREET MASPETH, NY 11378				
Creditor's email address, if known 				
Date debt was incurred _____				
Last 4 digits of account number _____				
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien Article 3-A Claimant Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

2.74	Creditor's name FGH REBAR	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 1,044.35	\$ Undetermined
Creditor's mailing address 101 HUDSON STREET, STE 21100 JERSEY CITY, NJ 07002				
Creditor's email address, if known 				
Date debt was incurred _____				
Last 4 digits of account number _____				
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien Article 3-A Claimant Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value of collateral.

Column B

Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.75 Creditor's name**Describe debtor's property that is subject to a lien**

FROMKIN BROTHERS, INCORPORATED

Statutory Trust Funds

\$ 2,123.06

\$ Undetermined

Creditor's mailing address125 CLEARVIEW RD # 1
EDISON, NJ 08837**Describe the lien**

Article 3-A Claimant

Creditor's email address, if known**Is the creditor an insider or related party?**

- ☒
- No
-
- ☐
- Yes

Date debt was incurred**Is anyone else liable on this claim?****Last 4 digits of account number**

- ☒
- No
-
- ☐
- Yes. Fill out
- Schedule H: Codebtors*
- (Official Form 206H).

Do multiple creditors have an interest in the same property?

- ☐
- No
-
- ☒
- Yes. Have you already specified the relative priority?
-
- ☐
- No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is: Check all that apply.

- ☒
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

- ☐
- Yes. The relative priority of creditors is specified on lines _____

2.76 Creditor's name**Describe debtor's property that is subject to a lien**

FURLONG & LEE STONE SALES, INC

Statutory Trust Funds

\$ 9,495.74

\$ Undetermined

Creditor's mailing address40 WEST 37TH STREET, ROOM 900
NEW YORK, NY 10018**Describe the lien**

Article 3-A Claimant

Creditor's email address, if known**Is the creditor an insider or related party?**

- ☒
- No
-
- ☐
- Yes

Date debt was incurred**Is anyone else liable on this claim?****Last 4 digits of account number**

- ☒
- No
-
- ☐
- Yes. Fill out
- Schedule H: Codebtors*
- (Official Form 206H).

Do multiple creditors have an interest in the same property?

- ☐
- No
-
- ☒
- Yes. Have you already specified the relative priority?
-
- ☐
- No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is: Check all that apply.

- ☒
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

- ☐
- Yes. The relative priority of creditors is specified on lines _____

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.77 Creditor's name <u>GARLOCK EAST EQUIP</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>3,808.45</u> \$ <u>Undetermined</u>
Creditor's mailing address 5135 34TH ST LONG ISLAND CITY, NY 11101	
Creditor's email address, if known _____	Describe the lien <u>Article 3-A Claimant</u>
Date debt was incurred _____ Last 4 digits of account number _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
2.78 Creditor's name <u>GARVIN BROWN INC</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>8,806.46</u> \$ <u>Undetermined</u>
Creditor's mailing address 3002 48TH AVE STE 1 LONG ISLAND CITY, NY 11101-3401	
Creditor's email address, if known _____	Describe the lien <u>Article 3-A Claimant</u>
Date debt was incurred _____ Last 4 digits of account number _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.79	Creditor's name GATEWAY DEMO/CIVIL CORP.	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 20,100.00	\$ Undetermined
Creditor's mailing address 41 BETHPAGE ROAD HICKSVILLE, NY 11801				
Creditor's email address, if known 				
Date debt was incurred _____ Last 4 digits of account number _____				
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien Article 3-A Claimant Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

2.80	Creditor's name GC PAK GENERAL CONTRACTOR INC	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 44,111.47	\$ Undetermined
Creditor's mailing address 2442 BRIGHAM ST BROOKLYN, NY 11235				
Creditor's email address, if known 				
Date debt was incurred _____ Last 4 digits of account number _____				
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien Article 3-A Claimant Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.81 Creditor's name <u>GENERAL INSULATION</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>2,106.16</u> \$ <u>Undetermined</u>
Creditor's mailing address 3842 REVIEW AVE STE 1 LONG ISLAND CITY, NY 11101-2045	Describe the lien <u>Article 3-A Claimant</u>
Creditor's email address, if known _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Date debt was incurred _____ Last 4 digits of account number _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed

2.82 Creditor's name <u>GLENWOOD MASON SUPPLY CO.</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>74,967.72</u> \$ <u>Undetermined</u>
Creditor's mailing address 4100 GLENWOOD ROAD BROOKLYN, NY 11210	Describe the lien <u>Article 3-A Claimant</u>
Creditor's email address, if known _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Date debt was incurred _____ Last 4 digits of account number _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

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2.83 Creditor's name

Describe debtor's property that is subject to a lien

GPRS INC

Statutory Trust Funds

\$ 5,400.00 \$ Undetermined

Creditor's mailing address

7540 NEW WEST ROAD
TOLEDO, OH 43617

Describe the lien

Article 3-A Claimant

Creditor's email address, if known

Is the creditor an insider or related party?

- ☒ No
☐ Yes

Date debt was incurred

Is anyone else liable on this claim?

Last 4 digits of account number

- ☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Do multiple creditors have an interest in the same property?

- ☐ No
☒ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is: Check all that apply.

- ☒ Contingent
☐ Unliquidated
☐ Disputed

- ☐ Yes. The relative priority of creditors is specified on lines _____

2.84 Creditor's name

Describe debtor's property that is subject to a lien

HAILEY INSULATION CORP.

Statutory Trust Funds

\$ 37,020.81 \$ Undetermined

Creditor's mailing address

585 ROUTE 25A
ROCKY POINT, NY 11778

Describe the lien

Article 3-A Claimant

Creditor's email address, if known

Is the creditor an insider or related party?

- ☒ No
☐ Yes

Date debt was incurred

Is anyone else liable on this claim?

Last 4 digits of account number

- ☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Do multiple creditors have an interest in the same property?

- ☐ No
☒ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is: Check all that apply.

- ☒ Contingent
☐ Unliquidated
☐ Disputed

- ☐ Yes. The relative priority of creditors is specified on lines _____

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.85	Creditor's name <u>HARDWOOD MILLS, INC.</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>11,900.00</u>	\$ <u>Undetermined</u>
Creditor's mailing address P.O. BOX 660 MILLINGTON, MD 21651		Describe the lien <u>Article 3-A Claimant</u>	
Creditor's email address, if known _____		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Date debt was incurred _____ Last 4 digits of account number _____		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).	
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
2.86	Creditor's name <u>HEITZ LANDSCAPING</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>2,305.50</u>	\$ <u>Undetermined</u>
Creditor's mailing address 4228 235TH ST LITTLE NECK, NY 11363		Describe the lien <u>Article 3-A Claimant</u>	
Creditor's email address, if known _____		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Date debt was incurred _____ Last 4 digits of account number _____		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).	
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.87 Creditor's name HILO MATERIAL HANDLING	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 1,040.57	\$ Undetermined
Creditor's mailing address 845 S. 1ST STREET RONKONKOMA, NY 11779	Describe the lien Article 3-A Claimant		
Creditor's email address, if known 	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Date debt was incurred _____ Last 4 digits of account number _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

2.88 Creditor's name HILTI INC.	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 45,238.21	\$ Undetermined
Creditor's mailing address P.O. BOX 11870 NEWARK, NJ 07101	Describe the lien Article 3-A Claimant		
Creditor's email address, if known 	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Date debt was incurred _____ Last 4 digits of account number _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.89	Creditor's name <u>HOHMANN & BARNARD</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ <u>20,413.88</u>	\$ <u>Undetermined</u>
Creditor's mailing address P.O. BOX 3158 BOSTON, MA 02241-3158				
Creditor's email address, if known _____				
Date debt was incurred _____				
Last 4 digits of account number _____				
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.		Describe the lien <u>Article 3-A Claimant</u>		
		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
		<input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		

2.90	Creditor's name <u>HOWARD I SHAPIRO & ASSOCIATES</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ <u>11,978.29</u>	\$ <u>Undetermined</u>
Creditor's mailing address 266 MERRICK ROAD SUITE 300 LYNBROOK, NY 11563				
Creditor's email address, if known _____				
Date debt was incurred _____				
Last 4 digits of account number _____				
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.		Describe the lien <u>Article 3-A Claimant</u>		
		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
		<input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.91 Creditor's name HUCATAO CORP. Creditor's mailing address 72 SHARROT AVE, UNIT H STATEN ISLAND, NY 10309 Creditor's email address, if known Date debt was incurred _____ Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ 35,938.00 \$ Undetermined Describe the lien Article 3-A Claimant Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
2.92 Creditor's name HUNTINGTON POWER EQUIPMENT Creditor's mailing address P.O. BOX 2040 SHELTON, CT 06484 Creditor's email address, if known Date debt was incurred _____ Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ 211,000.00 \$ Undetermined Describe the lien Article 3-A Claimant Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

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2.93	Creditor's name IN ATLANTIC CONCRETE CUTTING INC	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 2,850.00	\$ Undetermined
Creditor's mailing address P.O. BOX 98 MOUNT HOLLY, NJ 08060				
Creditor's email address, if known 				
Date debt was incurred _____ Last 4 digits of account number _____				
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien Article 3-A Claimant Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
2.94	Creditor's name INDEPENDENT EQUIPMENT CORP.	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 9,023.45	\$ Undetermined
Creditor's mailing address 500 SHAMES DRIVE WESTBURY, NY 11590				
Creditor's email address, if known 				
Date debt was incurred _____ Last 4 digits of account number _____				
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien Article 3-A Claimant Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

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2.95	Creditor's name INDUSTRIAL FLOORWORKS	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 9,074.99	\$ Undetermined
Creditor's mailing address 2447 LONG BEACH ROAD OCEANSIDE, NY 11572		Describe the lien Article 3-A Claimant		
Creditor's email address, if known 		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Date debt was incurred _____ Last 4 digits of account number _____		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
2.96	Creditor's name INDUSTRIAL U.S.A., INC	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 4,246.13	\$ Undetermined
Creditor's mailing address 136 WALLABOUT STREET, SUITE 6A BROOKLYN, NY 11249		Describe the lien Article 3-A Claimant		
Creditor's email address, if known 		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Date debt was incurred _____ Last 4 digits of account number _____		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

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2.97 Creditor's name <u>INTEGRITY IRON INC.</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>1,260.16</u> \$ <u>Undetermined</u>
Creditor's mailing address 56 SCHOOL ST UNIT B GLEN COVE, NY 11542-2568	
Creditor's email address, if known _____	Describe the lien <u>Article 3-A Claimant</u>
Date debt was incurred _____ Last 4 digits of account number _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).
	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
2.98 Creditor's name <u>J & S SUPPLY CORP</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>18,340.00</u> \$ <u>Undetermined</u>
Creditor's mailing address 53-02 37TH STREET LONG ISLAND CITY, NY 11101	
Creditor's email address, if known _____	Describe the lien <u>Article 3-A Claimant</u>
Date debt was incurred _____ Last 4 digits of account number _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).
	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

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2.99	Creditor's name J.F. LOMMA, INC. Creditor's mailing address 48 THIRD STREET SOUTH KEARNY, NJ 07032 Creditor's email address, if known Date debt was incurred _____ Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ 33,019.00 \$ Undetermined Describe the lien Article 3-A Claimant Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
2.100	Creditor's name JM&A CONSTRUCTION CORP. Creditor's mailing address 222-32 93RD ROAD QUEENS, NY 11428 Creditor's email address, if known Date debt was incurred _____ Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ 71,273.26 \$ Undetermined Describe the lien Article 3-A Claimant Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

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2.101	Creditor's name <u>JOSEPH JERMANN</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>1,000.00</u> \$ <u>Undetermined</u>
	Creditor's mailing address 84-19 262 STREET FLORAL PARK, NY 11001	
	Creditor's email address, if known _____	Describe the lien <u>Article 3-A Claimant</u>
	Date debt was incurred _____ Last 4 digits of account number _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).
		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
2.102	Creditor's name <u>KATCO ELECTRIC</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>8,437.50</u> \$ <u>Undetermined</u>
	Creditor's mailing address 44-15 BARNETT AVENUE LONG ISLAND CITY, NY 11104	
	Creditor's email address, if known _____	Describe the lien <u>Article 3-A Claimant</u>
	Date debt was incurred _____ Last 4 digits of account number _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).
		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.103	Creditor's name KERRY LEASING LLC	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 298,520.25	\$ Undetermined
Creditor's mailing address 633 THIRD AVENUE 17TH FLOOR NEW YORK, NY 10017		Describe the lien Article 3-A Claimant		
Creditor's email address, if known 		Is the creditor an insider or related party? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes		
Date debt was incurred _____ Last 4 digits of account number _____		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
2.104	Creditor's name KG POWER SYSTEMS	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 33,264.56	\$ Undetermined
Creditor's mailing address 150 LASER COURT HAUPPAUGE, NY 11788		Describe the lien Article 3-A Claimant		
Creditor's email address, if known 		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Date debt was incurred _____ Last 4 digits of account number _____		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

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2.105	Creditor's name KINGS READY MIX, INC	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 28,676.59	\$ Undetermined
Creditor's mailing address 10 POWERHOUSE RD ROSLYN HEIGHTS, NY 11577-1311				
Creditor's email address, if known 				
Date debt was incurred _____				
Last 4 digits of account number _____				
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien Article 3-A Claimant Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

2.106	Creditor's name KONICA MINOLTA BUSINESS SOLUTIONS USA INC	Describe debtor's property that is subject to a lien All office equipment, computers, security systems or other items leased to lessee	\$ Undetermined	\$ Undetermined
Creditor's mailing address 10201 CENTURION PKWY N, STE 100 JACKSONVILLE, FL 32256				
Creditor's email address, if known 				
Date debt was incurred _____				
Last 4 digits of account number _____				
Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien UCC Lien Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.107	Creditor's name <u>KONICA MINOLTA PREMIER FINANCE</u>	Describe debtor's property that is subject to a lien All equipment leased to lessee \$ <u>Undetermined</u>	\$ <u>Undetermined</u>
Creditor's mailing address 10201 CENTURION PKWY N, STE 100 JACKSONVILLE, FL 32256			
Creditor's email address, if known _____			
Date debt was incurred _____			
Last 4 digits of account number _____			
Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien <u>UCC Lien</u>	
		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).	
		As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	

2.108	Creditor's name <u>LEMODE PLUMBING & HEATING CORP</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>450,000.00</u>	\$ <u>Undetermined</u>
Creditor's mailing address 34-55 11ST LONG ISLAND CITY, NY 11106			
Creditor's email address, if known _____			
Date debt was incurred _____			
Last 4 digits of account number _____			
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien <u>Article 3-A Claimant</u>	
		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).	
		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value of collateral.

Column B

Value of collateral that supports this claim

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2.109

Creditor's name

LES MATRICES CARRITEC INC.

Describe debtor's property that is subject to a lien

Statutory Trust Funds

\$ 35,000.00

\$ Undetermined

Creditor's mailing address

575 BOULEVARD MORGAN
BAIE-D'URFE QB H9X 3T6

Describe the lien

Article 3-A Claimant

Creditor's email address, if known

Is the creditor an insider or related party?

- ☒ No
☐ Yes

Date debt was incurred

Is anyone else liable on this claim?

- ☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

- ☐ No
☒ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is: Check all that apply.

- ☒ Contingent
☐ Unliquidated
☐ Disputed

- ☐ Yes. The relative priority of creditors is specified on lines _____

2.110

Creditor's name

LIBERTY MUTUAL INSURANCE COMPANY

Describe debtor's property that is subject to a lien

Article 3-A/Equitable Subrogation rights

\$ Undetermined

\$ Undetermined

Creditor's mailing address

2200 RENAISSANCE BLVD, STE 440
KING OF PRUSSIA, PA 19406-2755

Describe the lien

Creditor's email address, if known

Is the creditor an insider or related party?

- ☒ No
☐ Yes

Date debt was incurred

Is anyone else liable on this claim?

- ☐ No
☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

- ☒ No
☐ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is: Check all that apply.

- ☒ Contingent
☒ Unliquidated
☐ Disputed

- ☐ Yes. The relative priority of creditors is specified on lines _____

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

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2.111	Creditor's name LIBERTY PLUMBING, INC.	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 3,154.27	\$ Undetermined
Creditor's mailing address 59-05 39TH AVENUE WOODSIDE, NY 11377				
Creditor's email address, if known 				
Date debt was incurred _____				
Last 4 digits of account number _____				
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien Article 3-A Claimant Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

2.112	Creditor's name LJB CONTRACTING INC	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 10,000.00	\$ Undetermined
Creditor's mailing address 154 HAMBLETONIAN ROAD CHESTER, NY 10918				
Creditor's email address, if known 				
Date debt was incurred _____				
Last 4 digits of account number _____				
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien Article 3-A Claimant Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

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2.113	Creditor's name LUMBER BOYS	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 1,272.77	\$ Undetermined
Creditor's mailing address 699 2ND AVE. NEW YORK, NY 10016		Describe the lien Article 3-A Claimant		
Creditor's email address, if known 		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Date debt was incurred _____ Last 4 digits of account number _____		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

2.114	Creditor's name M&D FIREDOOR	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 2,304.14	\$ Undetermined
Creditor's mailing address BROOKLYN NAVY YARD, BLDG #500 63 FLUSHING AVE, UNIT 139 BROOKLYN, NY 11205		Describe the lien Article 3-A Claimant		
Creditor's email address, if known 		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Date debt was incurred _____ Last 4 digits of account number _____		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

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2.115	Creditor's name MANHATTAN EQUIPMENT RENTAL	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 145,598.62	\$ Undetermined
Creditor's mailing address 413 E. 119TH STREET NEW YORK, NY 10035				
Creditor's email address, if known 				
Date debt was incurred _____				
Last 4 digits of account number _____				
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien Article 3-A Claimant Is the creditor an insider or related party? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

2.116	Creditor's name MARJAM SUPPLY	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 61,100.85	\$ Undetermined
Creditor's mailing address 885 CONKLIN STREET FARMINGDALE, NY 11735				
Creditor's email address, if known 				
Date debt was incurred _____				
Last 4 digits of account number _____				
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien Article 3-A Claimant Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

Part 1: Additional Page

Column A	Column B
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2.117	Creditor's name <u>MASTER RIGGING LLC</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>2,000.00</u>	\$ <u>Undetermined</u>
Creditor's mailing address 628 RUSSET ROAD VALLEY COTTAGE, NY 10989			
Creditor's email address, if known _____			
Date debt was incurred _____ Last 4 digits of account number _____			
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien <u>Article 3-A Claimant</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	

2.118	Creditor's name <u>MECO ELECTRIC CO., INC.</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>920,774.46</u>	\$ <u>Undetermined</u>
Creditor's mailing address 56 WEST STREET STATEN ISLAND, NY 10310			
Creditor's email address, if known _____			
Date debt was incurred _____ Last 4 digits of account number _____			
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien <u>Article 3-A Claimant</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.119	Creditor's name MESSINA ASPHALT CORP. Creditor's mailing address 18-50 42ND STREET ASTORIA, NY 11105 Creditor's email address, if known Date debt was incurred _____ Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ 2,125.00 \$ Undetermined Describe the lien Article 3-A Claimant Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
2.120	Creditor's name METALWERKS Creditor's mailing address 401 STEEL STREET ALQUIPPA, PA 15001 Creditor's email address, if known Date debt was incurred _____ Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ 10,675.00 \$ Undetermined Describe the lien Article 3-A Claimant Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.121	Creditor's name <u>METROCOM NYC</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>6,840.79</u> \$ <u>Undetermined</u>
	Creditor's mailing address 250 WEST 40TH STREET 4TH FLOOR NEW YORK, NY 10018	
	Creditor's email address, if known _____	Describe the lien <u>Article 3-A Claimant</u>
	Date debt was incurred _____ Last 4 digits of account number _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).
		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
2.122	Creditor's name <u>MFS CONSULTING ENGINEERS</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>6,871.00</u> \$ <u>Undetermined</u>
	Creditor's mailing address 2780 HAMILTON BLVD. SOUTH PLAINFIELD, NJ 07080	
	Creditor's email address, if known _____	Describe the lien <u>Article 3-A Claimant</u>
	Date debt was incurred _____ Last 4 digits of account number _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).
		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.123	Creditor's name <u>MIDTOWN TERRAZZO</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>58,324.11</u> \$ <u>Undetermined</u>
	Creditor's mailing address 121 PATTERSON STREET HILLSDALE, NJ 07642	
	Creditor's email address, if known _____	Describe the lien <u>Article 3-A Claimant</u>
	Date debt was incurred _____ Last 4 digits of account number _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).
	Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
2.124	Creditor's name <u>MILLER DRUCK</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>1,849.84</u> \$ <u>Undetermined</u>
	Creditor's mailing address 264 WEST 40TH STREET NEW YORK, NY 10018	
	Creditor's email address, if known _____	Describe the lien <u>Article 3-A Claimant</u>
	Date debt was incurred _____ Last 4 digits of account number _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).
	Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed

Part 1: Additional Page*Column A***Amount of claim**

Do not deduct the value of collateral.

*Column B***Value of collateral that supports this claim**

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2.125

Creditor's name

MLB DOOR & HARDWARE

Describe debtor's property that is subject to a lien

Statutory Trust Funds

\$ 1,941.24

\$ Undetermined

Creditor's mailing address103-02 93RD STREET
OZONE PARK, NY 11417**Describe the lien**

Article 3-A Claimant

Creditor's email address, if known**Is the creditor an insider or related party?**☒ No☐ Yes**Date debt was incurred****Is anyone else liable on this claim?**☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).**Last 4 digits of account number****Do multiple creditors have an interest in the same property?**☐ No☒ Yes. Have you already specified the relative priority?☐ No. Specify each creditor, including this creditor, and its relative priority.**As of the petition filing date, the claim is: Check all that apply.**☒ Contingent☐ Unliquidated☐ Disputed☐ Yes. The relative priority of creditors is specified on lines _____

2.126

Creditor's name

MORROW EQUIPMENT COMP LLC

Describe debtor's property that is subject to a lien

Statutory Trust Funds

\$ 295,625.37

\$ Undetermined

Creditor's mailing addressP.O. BOX 3306
SALEM, OR 97302**Describe the lien**

Article 3-A Claimant

Creditor's email address, if known**Is the creditor an insider or related party?**☒ No☐ Yes**Date debt was incurred****Is anyone else liable on this claim?**☒ No☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).**Last 4 digits of account number****Do multiple creditors have an interest in the same property?**☐ No☒ Yes. Have you already specified the relative priority?☐ No. Specify each creditor, including this creditor, and its relative priority.**As of the petition filing date, the claim is: Check all that apply.**☒ Contingent☐ Unliquidated☐ Disputed☐ Yes. The relative priority of creditors is specified on lines _____

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.127	Creditor's name <u>NEMO TILE CO., INC.</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>70,149.09</u>	\$ <u>Undetermined</u>
Creditor's mailing address 121 EAST 24TH STREET 2ND FLOOR NEW YORK, NY 10010		Describe the lien <u>Article 3-A Claimant</u>	
Creditor's email address, if known _____		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Date debt was incurred _____ Last 4 digits of account number _____		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).	
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	

2.128	Creditor's name <u>NEW YORK CONCRETE WASHOUT SYS</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>1,704.98</u>	\$ <u>Undetermined</u>
Creditor's mailing address 179 RYERSON AVENUE PATERSON, NJ 07502		Describe the lien <u>Article 3-A Claimant</u>	
Creditor's email address, if known _____		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Date debt was incurred _____ Last 4 digits of account number _____		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).	
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.129	Creditor's name NEW YORK SAND & STONE LLC	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 4,112.81	\$ Undetermined
Creditor's mailing address 5700 47TH ST MASPETH, NY 11378-2103		Describe the lien Article 3-A Claimant		
Creditor's email address, if known 		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Date debt was incurred _____ Last 4 digits of account number _____		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
2.130	Creditor's name NICO ASPHALT PAVING, INC	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 61,081.00	\$ Undetermined
Creditor's mailing address 341 NASSAU AVENUE BROOKLYN, NY 11222		Describe the lien Article 3-A Claimant		
Creditor's email address, if known 		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Date debt was incurred _____ Last 4 digits of account number _____		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.133	Creditor's name ONE STOP BLUEPRINTING	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 323.97	\$ Undetermined
Creditor's mailing address 80 MCGUINESS BLVD SOUTH BROOKLYN, NY 11222		Describe the lien Article 3-A Claimant		
Creditor's email address, if known 		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Date debt was incurred _____ Last 4 digits of account number _____		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
2.134	Creditor's name ORANGE FLOOD CONTROL	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 314,522.97	\$ Undetermined
Creditor's mailing address 48 BI-STATE PLAZA SUITE 256 OLD TAPPAN, NJ 07675		Describe the lien Article 3-A Claimant		
Creditor's email address, if known 		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Date debt was incurred _____ Last 4 digits of account number _____		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.135	Creditor's name PACIFIC ELECTRICAL CONTRACTING	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 10,091.71	\$ Undetermined
Creditor's mailing address 955 PACIFIC STREET BROOKLYN, NY 11238				
Creditor's email address, if known 				
Date debt was incurred _____ Last 4 digits of account number _____				
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien Article 3-A Claimant Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
2.136	Creditor's name PACKAGE PAVEMENT CO., INC.	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 101,813.99	\$ Undetermined
Creditor's mailing address P.O. BOX 408 STORMVILLE, NY 12582				
Creditor's email address, if known 				
Date debt was incurred _____ Last 4 digits of account number _____				
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien Article 3-A Claimant Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.137	Creditor's name PEERLESS COATINGS. LLC	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 1,800.00	\$ Undetermined
Creditor's mailing address 220A GOFFLE ROAD HAWTHORNE, NJ 07506		Describe the lien Article 3-A Claimant		
Creditor's email address, if known 		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Date debt was incurred _____ Last 4 digits of account number _____		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
2.138	Creditor's name PERI FORMWORK SYSTEMS INC.	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 233,251.79	\$ Undetermined
Creditor's mailing address 62149 COLLECTION CENTER DRIVE FORMWORK AND SHORING CHICAGO, IL 60693-0621		Describe the lien Article 3-A Claimant		
Creditor's email address, if known 		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Date debt was incurred _____ Last 4 digits of account number _____		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.139	Creditor's name PMC REBAR INC	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 676,254.99	\$ Undetermined
Creditor's mailing address 47 WOODCHUCK HOLLOW COURT PORT JEFFERSON, NY 11777		Describe the lien Article 3-A Claimant		
Creditor's email address, if known 		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Date debt was incurred _____ Last 4 digits of account number _____		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
2.140	Creditor's name POWER PAK CIVIL & SAFETY	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 8,219.82	\$ Undetermined
Creditor's mailing address 225 NORTH ROUTE 303 UNIT 108 CONGERS, NY 10920		Describe the lien Article 3-A Claimant		
Creditor's email address, if known 		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Date debt was incurred _____ Last 4 digits of account number _____		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.141	Creditor's name PR STONE CORP. Creditor's mailing address 17 BEADEL STREET BROOKLYN, NY 11222 Creditor's email address, if known Date debt was incurred _____ Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ 613.91 \$ Undetermined Describe the lien Article 3-A Claimant Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
2.142	Creditor's name PRECISION CONCRETE PUMPING, INC. Creditor's mailing address P.O. BOX 6970 ALBANY, NY 12206 Creditor's email address, if known Date debt was incurred _____ Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ 83,503.98 \$ Undetermined Describe the lien Article 3-A Claimant Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.143	Creditor's name <u>PRIDE EQUIPMENT CORP.</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>58,438.29</u>	\$ <u>Undetermined</u>
Creditor's mailing address 150 NASSAU AVENUE ISLIP, NY 11751			
Creditor's email address, if known _____			
Date debt was incurred _____ Last 4 digits of account number _____			
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien <u>Article 3-A Claimant</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
2.144	Creditor's name <u>PRO TILE DISTRIBUTORS, INC</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>83,744.04</u>	\$ <u>Undetermined</u>
Creditor's mailing address 230 EAST 7TH STREET MOUNT VERNON, NY 10550			
Creditor's email address, if known _____			
Date debt was incurred _____ Last 4 digits of account number _____			
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien <u>Article 3-A Claimant</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.145	Creditor's name <u>QUEENS BRICK & STONE, INC.</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ <u>55,646.80</u>	\$ <u>Undetermined</u>
Creditor's mailing address 333 7TH AVENUE 5TH FLOOR NEW YORK, NY 10001		Describe the lien <u>Article 3-A Claimant</u>		
Creditor's email address, if known _____		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Date debt was incurred _____ Last 4 digits of account number _____		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
2.146	Creditor's name <u>QUEST CONCRETE CORP</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ <u>10,683.97</u>	\$ <u>Undetermined</u>
Creditor's mailing address 3 VINCENT COURT EAST NORPTHPORT, NY 11731		Describe the lien <u>Article 3-A Claimant</u>		
Creditor's email address, if known _____		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Date debt was incurred _____ Last 4 digits of account number _____		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.147	Creditor's name RAPID STEEL SUPPLY CORP.	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 28,615.56	\$ Undetermined
Creditor's mailing address 49-63 30TH STREET LONG ISLAND CITY, NY 11101				
Creditor's email address, if known 		Describe the lien Article 3-A Claimant		
		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Date debt was incurred _____		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
Last 4 digits of account number _____				
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

2.148	Creditor's name RHODES ARCHITECTURAL STONE	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 4,898.09	\$ Undetermined
Creditor's mailing address 106 NW 36TH ST SEATTLE, WA 98107-4921				
Creditor's email address, if known 		Describe the lien Article 3-A Claimant		
		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Date debt was incurred _____		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
Last 4 digits of account number _____				
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

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2.149	Creditor's name <u>ROCA USA INC</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>2,500.40</u> \$ <u>Undetermined</u>
	Creditor's mailing address 11190 NW 25TH ST. MIAMI, FL 33172	
	Creditor's email address, if known _____	Describe the lien <u>Article 3-A Claimant</u>
	Date debt was incurred _____ Last 4 digits of account number _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).
	Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed

2.150	Creditor's name <u>SA MR. SAFETY NET</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>9,327.33</u> \$ <u>Undetermined</u>
	Creditor's mailing address 199 LEE AVE. BROOKLYN, NY 11211	
	Creditor's email address, if known _____	Describe the lien <u>Article 3-A Claimant</u>
	Date debt was incurred _____ Last 4 digits of account number _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).
	Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

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2.151	Creditor's name <u>SIEFERT ASSOCIATES LLC</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>9,947.25</u> \$ <u>Undetermined</u>
	Creditor's mailing address 180 CHURCH ST NAUGATUCK, CT 06770	
	Creditor's email address, if known _____	Describe the lien <u>Article 3-A Claimant</u>
	Date debt was incurred _____ Last 4 digits of account number _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).
	Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
2.152	Creditor's name <u>SIGNATURE BANK</u>	Describe debtor's property that is subject to a lien All other personal property and fixtures of the Debtor or in which the Debtor has an interest \$ <u>Undetermined</u> \$ <u>Undetermined</u>
	Creditor's mailing address 565 FIFTH AVE NEW YORK, NY 10017	
	Creditor's email address, if known _____	Describe the lien <u>UCC Lien</u>
	Date debt was incurred _____ Last 4 digits of account number _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).
	Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.153	Creditor's name SIGNATURE BANK	Describe debtor's property that is subject to a lien Shnell Multifunction Bar Wiser 22 N Multifeed & Shnell Dual Bender Robo Basic	\$ Undetermined	\$ Undetermined
Creditor's mailing address 565 FIFTH AVE NEW YORK, NY 10017				
Creditor's email address, if known 		Describe the lien UCC Lien		
Date debt was incurred _____		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Last 4 digits of account number _____		Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

2.154	Creditor's name SM CELTIC SHEET METAL	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 1,155.94	\$ Undetermined
Creditor's mailing address 100 BRENNER DRIVE CONGERS, NY 10920				
Creditor's email address, if known 		Describe the lien Article 3-A Claimant		
Date debt was incurred _____		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Last 4 digits of account number _____		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.155	Creditor's name <u>SPECIALTY FLOORING SYSTEMS INC</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>2,450.00</u>	\$ <u>Undetermined</u>
Creditor's mailing address 603 WASHINGTON AVE # 4 SOUTH AMBOY, NJ 08879			
Creditor's email address, if known _____			
Date debt was incurred _____ Last 4 digits of account number _____			
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien <u>Article 3-A Claimant</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
2.156	Creditor's name <u>SSESCO, INCORPORATED</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>624.48</u>	\$ <u>Undetermined</u>
Creditor's mailing address 1441 WITHERSPOON ST RAHWAY, NJ 07065-5512			
Creditor's email address, if known _____			
Date debt was incurred _____ Last 4 digits of account number _____			
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien <u>Article 3-A Claimant</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.157	Creditor's name <u>ST CFS STEEL COMPANY</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>1,250,072.55</u> \$ <u>Undetermined</u>
	Creditor's mailing address 695 E 132ND ST BRONX, NY 10454	
	Creditor's email address, if known _____	Describe the lien <u>Article 3-A Claimant</u>
	Date debt was incurred _____ Last 4 digits of account number _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).
		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
2.158	Creditor's name <u>STANLEY SUPPLY & TOOL</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>677.47</u> \$ <u>Undetermined</u>
	Creditor's mailing address PO BOX 997 FARMINGDALE, NY 11735	
	Creditor's email address, if known _____	Describe the lien <u>Article 3-A Claimant</u>
	Date debt was incurred _____ Last 4 digits of account number _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).
		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

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2.159	Creditor's name STEP UP SCAFFOLD	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 4,754.68	\$ Undetermined
Creditor's mailing address 54-20 50TH STREET MASPETH, NY 11378				
Creditor's email address, if known 				
Date debt was incurred _____				
Last 4 digits of account number _____				
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien Article 3-A Claimant Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

2.160	Creditor's name STILLWELL SUPPLY CORP.	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ 359,731.97	\$ Undetermined
Creditor's mailing address 44-68 VERNON BLVD. LONG ISLAND CITY, NY 11101				
Creditor's email address, if known 				
Date debt was incurred _____				
Last 4 digits of account number _____				
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien Article 3-A Claimant Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.163	Creditor's name <u>STONEFIELD ENGINEERING & DESIG</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>1,000.00</u> \$ <u>Undetermined</u>
	Creditor's mailing address 27-02 41ST AVE LONG ISLAND CITY, NY 11101	
	Creditor's email address, if known _____	Describe the lien <u>Article 3-A Claimant</u>
	Date debt was incurred _____ Last 4 digits of account number _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).
	Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
2.164	Creditor's name <u>STRAND CONSULTING CORP.</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>1,425.00</u> \$ <u>Undetermined</u>
	Creditor's mailing address 380 TOWNLINE RD #140 HAUPPAUGE, NY 11788	
	Creditor's email address, if known _____	Describe the lien <u>Article 3-A Claimant</u>
	Date debt was incurred _____ Last 4 digits of account number _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).
	Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed

Value of collateral that supports this claim

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.167	Creditor's name <u>STRUCTURE COMPLIANCE GROUP LLC</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>141,908.25</u>	\$ <u>Undetermined</u>
Creditor's mailing address 36-27 36TH STREET LONG ISLAND CITY, NY 11106			
Creditor's email address, if known _____			
Date debt was incurred _____			
Last 4 digits of account number _____			
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien <u>Article 3-A Claimant</u> Is the creditor an insider or related party? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	

2.168	Creditor's name <u>SUMMIT LAND SURVEYING</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>10,250.00</u>	\$ <u>Undetermined</u>
Creditor's mailing address 64 VIRGINIA AVENUE DOBBS FERRY, NY 10522			
Creditor's email address, if known _____			
Date debt was incurred _____			
Last 4 digits of account number _____			
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien <u>Article 3-A Claimant</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value of collateral.

Column B

Value of collateral that supports this claim

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2.169

Creditor's nameSUNBELT RENTALS**Describe debtor's property that is subject to a lien**

Statutory Trust Funds

\$ 54,676.12 \$ Undetermined**Creditor's mailing address**P.O. BOX 409211
ATLANTA, GA 30384-9211**Describe the lien**Article 3-A Claimant**Creditor's email address, if known****Is the creditor an insider or related party?**

- ☒
- No
-
- ☐
- Yes

Date debt was incurred**Is anyone else liable on this claim?****Last 4 digits of account number**

- ☒
- No
-
- ☐
- Yes. Fill out
- Schedule H: Codebtors*
- (Official Form 206H).

Do multiple creditors have an interest in the same property?

- ☐
- No
-
- ☒
- Yes. Have you already specified the relative priority?
-
- ☐
- No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is: Check all that apply.

- ☒
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

- ☐
- Yes. The relative priority of creditors is specified on lines _____

2.170

Creditor's nameSWING STAGING, INC.**Describe debtor's property that is subject to a lien**

Statutory Trust Funds

\$ 69,729.90 \$ Undetermined**Creditor's mailing address**PO BOX 1897
LONG ISLAND CITY, NY 11101-0897**Describe the lien**Article 3-A Claimant**Creditor's email address, if known****Is the creditor an insider or related party?**

- ☒
- No
-
- ☐
- Yes

Date debt was incurred**Is anyone else liable on this claim?****Last 4 digits of account number**

- ☒
- No
-
- ☐
- Yes. Fill out
- Schedule H: Codebtors*
- (Official Form 206H).

Do multiple creditors have an interest in the same property?

- ☐
- No
-
- ☒
- Yes. Have you already specified the relative priority?
-
- ☐
- No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is: Check all that apply.

- ☒
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

- ☐
- Yes. The relative priority of creditors is specified on lines _____

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.171	Creditor's name <u>TANNER BOLT & NUT CORP.</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>10,900.97</u>	\$ <u>Undetermined</u>
Creditor's mailing address 714 MONTAUK AVENUE BROOKLYN, NY 11208			
Creditor's email address, if known _____			
Date debt was incurred _____ Last 4 digits of account number _____			
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien <u>Article 3-A Claimant</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	

2.172	Creditor's name <u>TAP ELECTRICAL CONTRACTING SER</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>3,737.18</u>	\$ <u>Undetermined</u>
Creditor's mailing address 926 LINCOLN AVE STE A HOLBROOK, NY 11741-2276			
Creditor's email address, if known _____			
Date debt was incurred _____ Last 4 digits of account number _____			
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien <u>Article 3-A Claimant</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.173	Creditor's name <u>TAREK M. ZEID, P.E.</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>3,750.00</u>	\$ <u>Undetermined</u>
Creditor's mailing address 38-39 BELL BLVD., STE. 350 BAYSIDE, NY 11361			
Creditor's email address, if known _____			
Date debt was incurred _____ Last 4 digits of account number _____			
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien <u>Article 3-A Claimant</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
2.174	Creditor's name <u>TEC CRETE TRANSIT-MIX CORP.</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>76,839.38</u>	\$ <u>Undetermined</u>
Creditor's mailing address 4673 METROPOLITAN AVE. RIDGEWOOD, NY 11385			
Creditor's email address, if known _____			
Date debt was incurred _____ Last 4 digits of account number _____			
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien <u>Article 3-A Claimant</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value of collateral.

Column B

Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.175

Creditor's name**Describe debtor's property that is subject to a lien**

TECTONIC ENG & SURV CONSULT

Statutory Trust Funds

\$ 80,909.41 \$ Undetermined

Creditor's mailing addressP.O. BOX 37
MOUNTAINVILLE, NY 10953**Describe the lien**

Article 3-A Claimant

Creditor's email address, if known**Is the creditor an insider or related party?**

- ☒
- No
-
- ☐
- Yes

Date debt was incurred**Is anyone else liable on this claim?****Last 4 digits of account number**

- ☒
- No
-
- ☐
- Yes. Fill out
- Schedule H: Codebtors*
- (Official Form 206H).

Do multiple creditors have an interest in the same property?

- ☐
- No
-
- ☒
- Yes. Have you already specified the relative priority?
-
- ☐
- No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is: Check all that apply.

- ☒
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

- ☐
- Yes. The relative priority of creditors is specified on lines _____

2.176

Creditor's name**Describe debtor's property that is subject to a lien**

THE NORTH CAROLINA GRANITE COR

Statutory Trust Funds

\$ 38,593.21 \$ Undetermined

Creditor's mailing addressP.O. BOX 151
MOUNT AIRY, NC 27030**Describe the lien**

Article 3-A Claimant

Creditor's email address, if known**Is the creditor an insider or related party?**

- ☒
- No
-
- ☐
- Yes

Date debt was incurred**Is anyone else liable on this claim?****Last 4 digits of account number**

- ☒
- No
-
- ☐
- Yes. Fill out
- Schedule H: Codebtors*
- (Official Form 206H).

Do multiple creditors have an interest in the same property?

- ☐
- No
-
- ☒
- Yes. Have you already specified the relative priority?
-
- ☐
- No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is: Check all that apply.

- ☒
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

- ☐
- Yes. The relative priority of creditors is specified on lines _____

Part 1: Additional Page

Column A

Amount of claim

Do not deduct the value of collateral.

Column B

Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.177

Creditor's name

THE SAFETY GROUP LTD.

Describe debtor's property that is subject to a lien

Statutory Trust Funds

\$ 56,296.00

\$ Undetermined

Creditor's mailing address

11 HANOVER SQUARE
15TH FLOOR
NEW YORK, NY 10005

Describe the lien

Article 3-A Claimant

Creditor's email address, if known

Is the creditor an insider or related party?

- ☒ No
☐ Yes

Date debt was incurred

Is anyone else liable on this claim?

- ☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

- ☐ No
☒ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is: Check all that apply.

- ☒ Contingent
☐ Unliquidated
☐ Disputed

- ☐ Yes. The relative priority of creditors is specified on lines _____

2.178

Creditor's name

TOMCON INDUSTRIES

Describe debtor's property that is subject to a lien

Statutory Trust Funds

\$ 9,145.50

\$ Undetermined

Creditor's mailing address

525 NUBER AVENUE
MOUNT VERNON, NY 10550

Describe the lien

Article 3-A Claimant

Creditor's email address, if known

Is the creditor an insider or related party?

- ☒ No
☐ Yes

Date debt was incurred

Is anyone else liable on this claim?

- ☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

- ☐ No
☒ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

As of the petition filing date, the claim is: Check all that apply.

- ☒ Contingent
☐ Unliquidated
☐ Disputed

- ☐ Yes. The relative priority of creditors is specified on lines _____

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.179	Creditor's name <u>TRANSPORT EQUIPMENT SALES</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>32,026.61</u>	\$ <u>Undetermined</u>
Creditor's mailing address 286 CENTRAL AVE. SOUTH KEARNEY, NJ 07032			
Creditor's email address, if known _____			
Date debt was incurred _____ Last 4 digits of account number _____			
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien <u>Article 3-A Claimant</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	

2.180	Creditor's name <u>TRIBORO CONTRACTORS SUPPLY</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>8,892.65</u>	\$ <u>Undetermined</u>
Creditor's mailing address 120 EDWARD HART DRIVE JERSEY CITY, NJ 07305			
Creditor's email address, if known _____			
Date debt was incurred _____ Last 4 digits of account number _____			
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien <u>Article 3-A Claimant</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.181	Creditor's name <u>TRIPLE H CONSTRUCTION INC.</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>610,542.43</u>	\$ <u>Undetermined</u>
Creditor's mailing address 832 BETHLYNN COURT EAST MEADOW, NY 11554			
Creditor's email address, if known _____			
Date debt was incurred _____			
Last 4 digits of account number _____			
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien <u>Article 3-A Claimant</u>	
		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).	
		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
2.182	Creditor's name <u>ULMA FORM WORKS</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>8,688.22</u>	\$ <u>Undetermined</u>
Creditor's mailing address 16-00 ROUTE 208, SUITE LL4 FAIR LAWN, NJ 07410			
Creditor's email address, if known _____			
Date debt was incurred _____			
Last 4 digits of account number _____			
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien <u>Article 3-A Claimant</u>	
		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).	
		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.183	Creditor's name <u>UNITED FENCE & GUARD RAIL CORP</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>4,875.00</u>	\$ <u>Undetermined</u>
Creditor's mailing address 19 ZORN BLVD YAPHANK, NY 11980-2102			
Creditor's email address, if known _____			
Date debt was incurred _____			
Last 4 digits of account number _____			
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien <u>Article 3-A Claimant</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	

2.184	Creditor's name <u>UNITED RENTALS</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>7,738.39</u>	\$ <u>Undetermined</u>
Creditor's mailing address P.O. BOX 100711 ATLANTA, GA 30384-0711			
Creditor's email address, if known _____			
Date debt was incurred _____			
Last 4 digits of account number _____			
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		Describe the lien <u>Article 3-A Claimant</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H). As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.185	Creditor's name <u>UPTOWN ELECTRIC</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>277,020.00</u> \$ <u>Undetermined</u>
	Creditor's mailing address 22 MARY AVENUE RONKONKOMA, NY 11779	
	Creditor's email address, if known _____	Describe the lien <u>Article 3-A Claimant</u>
	Date debt was incurred _____ Last 4 digits of account number _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).
	Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed

2.186	Creditor's name <u>US ENVIR. CONSULTANT LAB, INC</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>750.00</u> \$ <u>Undetermined</u>
	Creditor's mailing address	
	Creditor's email address, if known _____	Describe the lien <u>Article 3-A Claimant</u>
	Date debt was incurred _____ Last 4 digits of account number _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).
	Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.187	Creditor's name <u>Varsity Plumbing & Heating Inc</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>675,075.78</u>	\$ <u>Undetermined</u>
Creditor's mailing address 31-99 123RD STREET FLUSHING, NY 11354			
Creditor's email address, if known _____		Describe the lien <u>Article 3-A Claimant</u>	
Date debt was incurred _____		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number _____		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).	
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
<input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____			

2.188	Creditor's name <u>Vermont Stone Art</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>121,543.95</u>	\$ <u>Undetermined</u>
Creditor's mailing address 206 HEGEMAN AVENUE COLCHESTER, VT 05446			
Creditor's email address, if known _____		Describe the lien <u>Article 3-A Claimant</u>	
Date debt was incurred _____		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Last 4 digits of account number _____		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).	
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
<input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____			

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.189	Creditor's name <u>VESTAR, INC.</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>89,201.73</u> \$ <u>Undetermined</u>
	Creditor's mailing address 261 MAIN ST LEDGEWOOD, NJ 07852-9610	
	Creditor's email address, if known _____	Describe the lien <u>Article 3-A Claimant</u>
	Date debt was incurred _____ Last 4 digits of account number _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).
	Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
2.190	Creditor's name <u>VFS US LLC</u>	Describe debtor's property that is subject to a lien 2015 Hino 195 & 2016 Mack Tractor \$ <u>Undetermined</u> \$ <u>Undetermined</u>
	Creditor's mailing address PO BOX 26131 GREENSBORO, NC 27402	
	Creditor's email address, if known _____	Describe the lien <u>UCC Lien</u>
	Date debt was incurred _____ Last 4 digits of account number _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).
	Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.191	Creditor's name <u>VON ROHR EQUIPMENT CORP.</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>23,654.56</u> \$ <u>Undetermined</u>
	Creditor's mailing address 2 NEW MAIN STREET EAST ORANGE, NJ 07019	
	Creditor's email address, if known _____	Describe the lien <u>Article 3-A Claimant</u>
	Date debt was incurred _____ Last 4 digits of account number _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).
		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
2.192	Creditor's name <u>WCD GROUP</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ <u>3,100.00</u> \$ <u>Undetermined</u>
	Creditor's mailing address 23 ROUTE 31 NORTH SUITE B26 PENNINGTON, NJ 08534	
	Creditor's email address, if known _____	Describe the lien <u>Article 3-A Claimant</u>
	Date debt was incurred _____ Last 4 digits of account number _____	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).
		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed

Part 1: Additional Page

Column A	Column B
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim

Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.

2.193	Creditor's name <u>WHITE CAP CONSTRUCTION SUPPLY</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ <u>249,875.31</u>	\$ <u>Undetermined</u>
Creditor's mailing address 1511 TONNELLE AVENUE NORTH BERGEN, NJ 07047				
Creditor's email address, if known _____				
Date debt was incurred _____				
Last 4 digits of account number _____				
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.		Describe the lien <u>Article 3-A Claimant</u>		
		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
		<input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		

2.194	Creditor's name <u>WILD WOMAN COMPANY INC</u>	Describe debtor's property that is subject to a lien Statutory Trust Funds	\$ <u>461.63</u>	\$ <u>Undetermined</u>
Creditor's mailing address P.O. BOX 323 MILL NECK, NY 11765				
Creditor's email address, if known _____				
Date debt was incurred _____				
Last 4 digits of account number _____				
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority.		Describe the lien <u>Article 3-A Claimant</u>		
		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).		
		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
		<input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		

Part 1: Additional Page		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim
Copy this page only if morespace is needed. Continue numbering the lines sequentially from the previous page.			
2.195	Creditor's name WJE ENGINEERS&ARCHITECTS P.C.	Describe debtor's property that is subject to a lien Statutory Trust Funds \$ 13,863.18 \$ Undetermined	
Creditor's mailing address 1350 BROADWAY, # 910 NEW YORK, NY 10018		Describe the lien Article 3-A Claimant	
Creditor's email address, if known 		Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
Date debt was incurred _____ Last 4 digits of account number _____		Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).	
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
2.196	Creditor's name 	Describe debtor's property that is subject to a lien \$ _____ \$ _____	
Creditor's mailing address 		Describe the lien 	
Creditor's email address, if known 		Is the creditor an insider or related party? <input type="checkbox"/> No <input type="checkbox"/> Yes	
Date debt was incurred _____ Last 4 digits of account number _____		Is anyone else liable on this claim? <input type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).	
Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____		As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address	On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for this entity
BORGES & ASSOCIATES, LLC ATTN WANDA BORGES, ESQ 575 UNDERHILL BLVD, STE 118 SYOSSET, NY 11791	Line 2. <u>11</u>	__ __ __ __
TODD & LEVI, LLP ATTN JILL LEVI, ESQ 444 MADISON AVENUE SUITE 1202 NEW YORK, NY 10022	Line 2. <u>25</u>	__ __ __ __
GIBBONS PC ATTN BRETT S THEISEN ONE PENNSYLVANIA PLAZA, 37TH FL. NEW YORK, NY 10119-3701	Line 2. <u>62</u>	__ __ __ __
JOSEPH J. FERRARA, ESQ. 120-05 31ST AVE FLUSHING, NY 11354	Line 2. <u>72</u>	__ __ __ __
TEITELBAUM LAW GROUP, LLC ATTN JAY TEITELBAUM, ESQ. 1 BARKER AVENUE, THIRD FLOOR WHITE PLAINS, NY 10601	Line 2. <u>144</u>	__ __ __ __
WEINBERG, GROSS & PERGAMENT LLP ATTN MARC A PERGAMENT 400 GARDEN CITY PLAZA, SUITE 403 GARDEN CITY, NY 11530	Line 2. <u>174</u>	__ __ __ __
LAMONICA HERBST & MANISCALCO, LLP ATTN JOSEPH S. MANISCALCO, ESQ. 3305 JERUSALEM AVENUE, SUITE 201 WANTAGH, NY 11793	Line 2. <u>187</u>	__ __ __ __

Fill in this information to identify the case:

Debtor Navillus Tile, Inc.

United States Bankruptcy Court for the: Southern District of New York

Case number (if known) 17-13162 (SHL)

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

- ☐ No. Go to Part 2.
- ☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

2.1 Priority creditor's name and mailing address

BCA IND ADVANCE PGM
2500 MARCUS AVE
LAKE SUCCESS, NY 11042

Date or dates debt was incurred

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)

As of the petition filing date, the claim is: \$ _____

Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Basis for the claim:

Union Claim

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Total claim

Priority amount

\$ 503.00

\$ 503.00

2.2 Priority creditor's name and mailing address

BRICKLAYER FRINGE BENEFIT FUND
66-05 WOODHAVEN BOULEVARD
REGO PARK, NY 11374

Date or dates debt was incurred

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)

As of the petition filing date, the claim is: \$ _____

Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Basis for the claim:

Union Claim

Is the claim subject to offset?

- ☒ No
- ☐ Yes

\$ 236,477.64

\$ 236,477.64

2.3 Priority creditor's name and mailing address

BRICKLAYERS FRINGE BENEFIT FUND
66-05 WOODHAVEN BOULEVARD
REGO PARK, NY 11374

Date or dates debt was incurred

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)

As of the petition filing date, the claim is: \$ _____

Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Basis for the claim:

Union Claim

Is the claim subject to offset?

- ☒ No
- ☐ Yes

\$ 11,016.00

\$ 11,016.00

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2. 4 Priority creditor's name and mailing address

BRICKLAYERS INT'L PENSION FUND
66-05 WOODHAVEN BOULEVARD
REGO PARK, NY 11374

As of the petition filing date, the claim is:*Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Union Claim

Last 4 digits of account number

Is the claim subject to offset?

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)

\$ 29,973.50 \$ 29,973.50

2. 5 Priority creditor's name and mailing address

BRICKLAYERS INT'L PENSION FUND
66-05 WOODHAVEN BOULEVARD
REGO PARK, NY 11374

As of the petition filing date, the claim is:*Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Union Claim

Last 4 digits of account number

Is the claim subject to offset?

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)

\$ 1,219.50 \$ 1,219.50

2. 6 Priority creditor's name and mailing address

BRICKLAYERS INT'L PENSION FUND
66-05 WOODHAVEN BOULEVARD
REGO PARK, NY 11374

As of the petition filing date, the claim is:*Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Union Claim

Last 4 digits of account number

Is the claim subject to offset?

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)

\$ 1,152.00 \$ 1,152.00

2. 7 Priority creditor's name and mailing address

CEMENT & CONCRETE BENEFIT FUND
ATTN MICHAEL SALGO, TRUSTEE
3530 FRANCIS LEWIS BLVD
STE 201
FLUSHING, NY 11358-1959

As of the petition filing date, the claim is:*Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Union Claim

Last 4 digits of account number

Is the claim subject to offset?

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)

\$ 441,897.37 \$ 441,897.37

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2. 8 Priority creditor's name and mailing address

CEMENT MASONS LOCAL 780
15050 14TH RD., #4
WHITESTONE, NY 11357

As of the petition filing date, the claim is:*Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 126,964.32 \$ 126,964.32

Date or dates debt was incurred

Basis for the claim:

Union Claim

Last 4 digits of account number _ _ _ _**Is the claim subject to offset?**

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)**2. 9 Priority creditor's name and mailing address**

CEMENT MASONS LOCAL 780 FRINGE
15050 14TH RD., #4
WHITESTONE, NY 11357

As of the petition filing date, the claim is:*Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 14,269.44 \$ 14,269.44

Date or dates debt was incurred

Basis for the claim:

Union Claim

Last 4 digits of account number _ _ _ _**Is the claim subject to offset?**

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)**2. 10 Priority creditor's name and mailing address**

DRYWALL TAPERS INSURANCE FUND
36-18 33RD ST, 2ND FL
LONG ISLAND CITY, NY 11106

As of the petition filing date, the claim is:*Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 3,025.31 \$ 3,025.31

Date or dates debt was incurred

Basis for the claim:

Union Claim

Last 4 digits of account number _ _ _ _**Is the claim subject to offset?**

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)**2. 11 Priority creditor's name and mailing address**

EXCAVATORS LOCAL 731 BENEFITS
34-11 35TH STREET
ASTORIA, NY 11106

As of the petition filing date, the claim is:*Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 13,658.61 \$ 13,658.61

Date or dates debt was incurred

Basis for the claim:

Union Claim

Last 4 digits of account number _ _ _ _**Is the claim subject to offset?**

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2. 12 Priority creditor's name and mailing address

EXCAVATORS UNION LOCAL 731
34-11 35TH STREET
ASTORIA, NY 11106

As of the petition filing date, the claim is:*Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 404.40 \$ 404.40

Date or dates debt was incurred**Basis for the claim:**

Union Claim

Last 4 digits of account number _ _ _ _**Is the claim subject to offset?**

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_ 4 _)**2. 13 Priority creditor's name and mailing address**

INDUSTRY ADVANCE PROGRAM BCA
451 PARK AVENUE
NEW YORK, NY 10016

As of the petition filing date, the claim is:*Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 3,977.50 \$ 3,977.50

Date or dates debt was incurred**Basis for the claim:**

Union Claim

Last 4 digits of account number _ _ _ _**Is the claim subject to offset?**

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_ 4 _)**2. 14 Priority creditor's name and mailing address**

IRON WORKERS LOCAL 40,361 & 41
451 PARK AVE S, 9TH FL
NEW YORK, NY 10016

As of the petition filing date, the claim is:*Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 31,478.23 \$ 31,478.23

Date or dates debt was incurred**Basis for the claim:**

Union Claim

Last 4 digits of account number _ _ _ _**Is the claim subject to offset?**

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_ 4 _)**2. 15 Priority creditor's name and mailing address**

LOCAL 1010 LECET
136-25 37TH AVE.
FLUSHING, NY 11354

As of the petition filing date, the claim is:*Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 187.47 \$ 187.47

Date or dates debt was incurred**Basis for the claim:**

Union Claim

Last 4 digits of account number _ _ _ _**Is the claim subject to offset?**

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_ 4 _)

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2. 16 Priority creditor's name and mailing addressLOCAL 282 ANNUITY FUND
2500 MARCUS AVENUE
LAKE SUCCESS, NY 11042

\$ 16,239.36 \$ 16,239.36

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Union Claim

Last 4 digits of account
number _ _ _ _**Is the claim subject to offset?**

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (4)**2. 17 Priority creditor's name and mailing address**LOCAL 282 BUILDING FUND
2500 MARCUS AVENUE
LAKE SUCCESS, NY 11042

\$ 201.20 \$ 201.20

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Union Claim

Last 4 digits of account
number _ _ _ _**Is the claim subject to offset?**

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (4)**2. 18 Priority creditor's name and mailing address**LOCAL 282 CHECK-OFF
2500 MARCUS AVENUE
LAKE SUCCESS, NY 11042

\$ 1,961.70 \$ 1,961.70

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Union Claim

Last 4 digits of account
number _ _ _ _**Is the claim subject to offset?**

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (4)**2. 19 Priority creditor's name and mailing address**LOCAL 282 JOB TRAINING
2500 MARCUS AVENUE
LAKE SUCCESS, NY 11042

\$ 150.90 \$ 150.90

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Union Claim

Last 4 digits of account
number _ _ _ _**Is the claim subject to offset?**

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (4)

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2. 20 Priority creditor's name and mailing addressLOCAL 282 PENSION FUND
2500 MARCUS AVENUE
LAKE SUCCESS, NY 11042

\$ 11,569.00 \$ 11,569.00

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Union Claim

Last 4 digits of account
number _ _ _ _**Is the claim subject to offset?**

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (4)**2. 21 Priority creditor's name and mailing address**LOCAL 282 WELFARE FUND
2500 MARCUS AVENUE
LAKE SUCCESS, NY 11042

\$ 16,448.10 \$ 16,448.10

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Union Claim

Last 4 digits of account
number _ _ _ _**Is the claim subject to offset?**

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (4)**2. 22 Priority creditor's name and mailing address**LOCAL 7 CLEARING ACCOUNT
253 WEST 35TH STREET, 12TH FL
NEW YORK, NY 10001

\$ 88,934.17 \$ 88,934.17

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Union Claim

Last 4 digits of account
number _ _ _ _**Is the claim subject to offset?**

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (4)**2. 23 Priority creditor's name and mailing address**MASON TENDERS DISTRICT COUNCIL
520 8TH AVE., #650
NEW YORK, NY 10018

\$ 1,065,846.61 \$ 1,065,846.61

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Union Claim

Last 4 digits of account
number _ _ _ _**Is the claim subject to offset?**

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (4)

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2. 24 Priority creditor's name and mailing addressN.E. DC of Plasterers & Cement
150-540 14TH RD, #4
WHITESTONE, NY 11357**As of the petition filing date, the claim is:**

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 2,015.72 \$ 2,015.72

Date or dates debt was incurred

Basis for the claim:

Union Claim

Last 4 digits of account
number _ _ _ _**Is the claim subject to offset?**

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (4)**2. 25 Priority creditor's name and mailing address**N.E. DC of Plasterers & Cement
150-540 14TH RD, #4
WHITESTONE, NY 11357**As of the petition filing date, the claim is:**

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 534.49 \$ 534.49

Date or dates debt was incurred

Basis for the claim:

Union Claim

Last 4 digits of account
number _ _ _ _**Is the claim subject to offset?**

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (4)**2. 26 Priority creditor's name and mailing address**NYDCC BENEFIT FUND
395 HUDSON ST, 9TH FLOOR
NEW YORK, NY 10014**As of the petition filing date, the claim is:**

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 145,913.95 \$ 145,913.95

Date or dates debt was incurred

Basis for the claim:

Union Claim

Last 4 digits of account
number _ _ _ _**Is the claim subject to offset?**

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (4)**2. 27 Priority creditor's name and mailing address**OPCMIA LOCAL 262 GENERAL BEN
3233 LACONIA AVENUE
BRONX, NY 10469**As of the petition filing date, the claim is:**

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 5,228.40 \$ 5,228.40

Date or dates debt was incurred

Basis for the claim:

Union Claim

Last 4 digits of account
number _ _ _ _**Is the claim subject to offset?**

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (4)

Part 1. Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2. 28 Priority creditor's name and mailing addressOPERATING ENGINEERS LOCAL 14
141-57 NORTH BLVD
FLUSHING, NY 11354

\$ 94,152.70 \$ 94,152.70

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Union Claim

Last 4 digits of account
number _ _ _ _

Is the claim subject to offset?

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (4)**2. 29 Priority creditor's name and mailing address**OPERATING ENGINEERS LOCAL 15
44-40 11TH STREET
LONG ISLAND CITY, NY 11101

\$ 38,171.74 \$ 38,171.74

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Union Claim

Last 4 digits of account
number _ _ _ _

Is the claim subject to offset?

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (4)**2. 30 Priority creditor's name and mailing address**P.I.I.A.F.
45-15 36TH ST
L.I.C., NY 11101

\$ 3,016.63 \$ 3,016.63

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Union Claim

Last 4 digits of account
number _ _ _ _

Is the claim subject to offset?

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (4)**2. 31 Priority creditor's name and mailing address**PAVERS FUNDS BENEFIT ACCT
136-25 37TH AVE.
FLUSHING, NY 11354

\$ 5,640.87 \$ 5,640.87

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Date or dates debt was incurred

Basis for the claim:

Union Claim

Last 4 digits of account
number _ _ _ _

Is the claim subject to offset?

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (4)

Part 1.

Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2. 32 Priority creditor's name and mailing address

POINTERS,CLEANER,CAULKER FUND
4 CT SQUARE W # 2
LONG ISLAND CITY, NY 11101

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 31,712.76 \$ 31,712.76

Date or dates debt was incurred

Last 4 digits of account
number _ _ _ _

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (_ 4 _)

Basis for the claim:

Union Claim

Is the claim subject to offset?

- ☒ No
☐ Yes

Part 2: List All Creditors with NONPRIORITY Unsecured Claims Page 128 of 177

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address 633 3RD AVE PROPERTY OWNER LLC 633 3RD AVE, 17TH FL NEW YORK, NY 10017 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: General Trade Payable Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ 83,773.91
3.2	Nonpriority creditor's name and mailing address AAA EXPERT SIGNS, LLC 3322 NORTHERN BLVD. LONG ISLAND CITY, NY 11101 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: General Trade Payable Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ 3,459.71
3.3	Nonpriority creditor's name and mailing address ACCORDANT COMPANY, LLC 365 SOUTH ST #100 MORRISTOWN, NJ 07960 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: General Trade Payable Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ 3,214.50
3.4	Nonpriority creditor's name and mailing address AIDAN CORRIDAN LOOKCLOSERPROD. 4827 64TH ST WOODSIDE, NY 11377 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: General Trade Payable Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ 2,100.00
3.5	Nonpriority creditor's name and mailing address AIG NATIONAL INSURANCE CO NATIONAL UNION FIRE INSURANCE CO. BOX 35657 NEWARK, NJ 07193-5657 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: General Trade Payable Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ 36,000.00
3.6	Nonpriority creditor's name and mailing address ALLY PO BOX 380901 BLOOMINGTON, MN 55438 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Auto Pymt Claim Acct #24925605000611925355273 Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$ Unknown

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.7 Nonpriority creditor's name and mailing address

ALYCIA BENJAMIN PEBBLES
C/O BERNARD H. BROOME, ESQ.
217 BROADWAY, SUITE 505
NEW YORK, NY 10007

As of the petition filing date, the claim is:*Check all that apply.*

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:Litigation Claim\$ Unliquidated

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.8 Nonpriority creditor's name and mailing address

AMERICAN EXPRESS
PO BOX 981531
EL PASO, TX 79998-1531

As of the petition filing date, the claim is:*Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:General Trade Payable\$ 3,378,499.40

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.9 Nonpriority creditor's name and mailing address

ANILA AND BLEDAR NDREU
C/O THE CAKANI LAW FIRM, P.C.
ATTN YLLI CAKANI, ESQ.
111 JOHN STREET, SUITE 1070
NEW YORK, NY 10038

As of the petition filing date, the claim is:*Check all that apply.*

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:Litigation Claim\$ Unliquidated

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.10 Nonpriority creditor's name and mailing address

AT&T MOBILITY
PO BOX 6463
CAROL STREAM, NY 60197-6463

As of the petition filing date, the claim is:*Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:General Trade Payable\$ 1,641.68

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.11 Nonpriority creditor's name and mailing address

BARBARA J SALES
126 VANANGO CT
NEW KENSINGTON, PA 15068

As of the petition filing date, the claim is:*Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:General Trade Payable\$ 379,568.00

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.12 Nonpriority creditor's name and mailing address

BESTWAY CARTING, INC
49-60 ANNADALE LANE
LITTLE NECK, NY 11362

As of the petition filing date, the claim is:*Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:General Trade Payable\$ 113,152.29

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.13 Nonpriority creditor's name and mailing address

BRENDA BOYCE
C/O SACCO & FILLAS
ATTN LAMONT K. RODGERS, ESQ.
31-19 NEWTOWN AVENUE, 7TH FLOOR
ASTORIA, NY 11102

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

Litigation Claim

\$ Unliquidated

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.14 Nonpriority creditor's name and mailing address

CARPENTERS FUNDS
C/O KENNEDY, JENNIK & MURRAY
ATTN THOMAS KENNEDY, ESQ.
113 UNIVERSITY PLACE
NEW YORK, NY 10003

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

Judgment Claim

\$ 27,159,658.10

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.15 Nonpriority creditor's name and mailing address

CARPENTERS FUNDS
C/O KENNEDY, JENNIK & MURRAY
ATTN THOMAS KENNEDY, ESQ.
113 UNIVERSITY PLACE
NEW YORK, NY 10003

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

Judgment Claim

\$ 815,424.20

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.16 Nonpriority creditor's name and mailing address

CEMENT WORKERS FUNDS
C/O KENNEDY JENNIK & MURRAY
ATTN THOMAS KENNEDY, ESQ.
113 UNIVERSITY PLACE
NEW YORK, NY 10003

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

Judgment Claim

\$ 21,148,271.12

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.17 Nonpriority creditor's name and mailing address

CEMENT WORKERS FUNDS
C/O KENNEDY JENNIK & MURRAY
ATTN THOMAS KENNEDY, ESQ.
113 UNIVERSITY PLACE
NEW YORK, NY 10003

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

Judgment Claim

\$ 778,138.74

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.18 Nonpriority creditor's name and mailing address

CENTURY WASTE SERVICES
623 DOWD AVE
ELIZABETH, NJ 07201

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 13,683.37

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.19 Nonpriority creditor's name and mailing address

CESAR A. FELIX
C/O CELLINO & BARNES, P.C.
ATTN ALEX BOUGANIM, ESQ.
420 LEXINGTON AVENUE, SUITE 2140
NEW YORK, NY 10170

As of the petition filing date, the claim is:*Check all that apply.*

- ☒ Contingent
☒ Unliquidated
☒ Disputed

\$ Unliquidated

Basis for the claim:Litigation Claim

Date or dates debt was incurred _____

Is the claim subject to offset?

Last 4 digits of account number _____

- ☒ No
☐ Yes

3.20 Nonpriority creditor's name and mailing address

CITI HABITATS
COMPANY HEADQUARTERS
387 PARK AVENUE SOUTH, 4TH FLOOR
NEW YORK, NY 10016

As of the petition filing date, the claim is:*Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 1,900.00

Basis for the claim:General Trade Payable

Date or dates debt was incurred _____

Is the claim subject to offset?

Last 4 digits of account number _____

- ☒ No
☐ Yes

3.21 Nonpriority creditor's name and mailing address

CITY MARSHAL RONALD MOSES
111 JOHN STREET, SUITE 500
NEW YORK, NY 10038

As of the petition filing date, the claim is:*Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 175.92

Basis for the claim:General Trade Payable

Date or dates debt was incurred _____

Is the claim subject to offset?

Last 4 digits of account number _____

- ☒ No
☐ Yes

3.22 Nonpriority creditor's name and mailing address

CONSTRUCTION CLAIMS GROUP
240 CEDAR KNOLLS RD # 106
CEDAR KNOLLS, NJ 07927

As of the petition filing date, the claim is:*Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 62,943.28

Basis for the claim:General Trade Payable

Date or dates debt was incurred _____

Is the claim subject to offset?

Last 4 digits of account number _____

- ☒ No
☐ Yes

3.23 Nonpriority creditor's name and mailing address

CONSTRUCTION RISK PARTNERS, LLC
1250 ROUTE 28, SUITE 201
BRANCHBURG, NJ 08876

As of the petition filing date, the claim is:*Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 1,633,791.00

Basis for the claim:General Trade Payable

Date or dates debt was incurred _____

Is the claim subject to offset?

Last 4 digits of account number _____

- ☒ No
☐ Yes

3.24 Nonpriority creditor's name and mailing address

CONSTRUCTION SPECIALTIES, INC.
6696 ROUTE 405 HWY
MUNCY, PA 17756

As of the petition filing date, the claim is:*Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 2,052.29

Basis for the claim:General Trade Payable

Date or dates debt was incurred _____

Is the claim subject to offset?

Last 4 digits of account number _____

- ☒ No
☐ Yes

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.25 Nonpriority creditor's name and mailing addressCONTRACTORS COMPENSATION TRUST
C/O GLACIER BAY TPA LLC
P.O BOX 2070
LATHAM, NY 12110**As of the petition filing date, the claim is:**

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 348,000.00

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.26 Nonpriority creditor's name and mailing addressCREATIVE MATERIALS CORPORATION
ONE WASHINGTON SQUARE
ALBANY, NY 12205**As of the petition filing date, the claim is:**

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 3,629.79

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.27 Nonpriority creditor's name and mailing address

CROWLEY, BRIAN

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 1,300.00

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.28 Nonpriority creditor's name and mailing addressCUMMINS SALES AND SERVICE
890 ZEREGA AVENUE
BRONX, NY 10473**As of the petition filing date, the claim is:**

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 7,802.03

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.29 Nonpriority creditor's name and mailing addressDESIGNWEST USA LLC
1116 EDGEWATER AVENUE
RIDGEFIELD, NJ 07657**As of the petition filing date, the claim is:**

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 10,688.75

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.30 Nonpriority creditor's name and mailing addressDIAL-A-BUG PEST CONTROL, INC.
548 CHERRY LANE
FLORAL PARK, NY 11001**As of the petition filing date, the claim is:**

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 922.72

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.31 Nonpriority creditor's name and mailing addressEDISON, CON
COOPER STATION
P.O. BOX 138
NEW YORK, NY 10276-0138**As of the petition filing date, the claim is:**

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 4,844.59

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.32 Nonpriority creditor's name and mailing addressEFCG
18 EAST 48TH STREET, 18TH FL
NEW YORK, NY 10017**As of the petition filing date, the claim is:**

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 2,500.00

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.33 Nonpriority creditor's name and mailing addressEXTECH BUILDING MATERIALS
P.O. BOX 51069
NEWARK, NJ 07101**As of the petition filing date, the claim is:**

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 10,145.09

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.34 Nonpriority creditor's name and mailing addressFAITH CONSTRUCTION INC
16 STEWART STREET
BROOKLYN, NY 11207**As of the petition filing date, the claim is:**

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 4,355.00

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.35 Nonpriority creditor's name and mailing addressFEDERAL EXPRESS
PO BOX 371461
PITTSBURGH, PA 15250**As of the petition filing date, the claim is:**

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 5,075.88

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.36 Nonpriority creditor's name and mailing addressFIROMAR, INC.
125-06 18TH AVE
COLLEGE POINT, NY 11356**As of the petition filing date, the claim is:**

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 266,667.68

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.37 Nonpriority creditor's name and mailing address

FORD CREDIT CUSTOMER SERVICE CENTER
PO BOX 542000
OMAHA, NE 68154

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

Auto Pymt Claim Acct #54364385

\$ Unknown

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.38 Nonpriority creditor's name and mailing address

FORD CREDIT CUSTOMER SERVICE CENTER
PO BOX 542000
OMAHA, NE 68154

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

Auto Pymt Claim Acct #54364424

\$ Unknown

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.39 Nonpriority creditor's name and mailing address

FORD CREDIT CUSTOMER SERVICE CENTER
PO BOX 542000
OMAHA, NE 68154

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

Auto Pymt Claim Acct #54364450

\$ Unknown

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.40 Nonpriority creditor's name and mailing address

FORD CREDIT CUSTOMER SERVICE CENTER
PO BOX 542000
OMAHA, NE 68154

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

Auto Pymt Claim Acct #5470386

\$ Unknown

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.41 Nonpriority creditor's name and mailing address

GABRIELLI TRUCK SALES
153-20 SOUTH CONDUIT AVE
JAMAICA, NY 11434-4221

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 81.60

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.42 Nonpriority creditor's name and mailing address

GC WAREHOUSE
515 S. 4TH AVE
MOUNT VERNON, NY 10550

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 5,318.66

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.43 Nonpriority creditor's name and mailing addressGOLDBERG & CONNOLLY
66 NORTH VILLAGE AVE
ROCKVILLE CENTER
NEW YORK, NY 11570**As of the petition filing date, the claim is:**

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

General Trade Payable

\$ 5,960.25

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.44 Nonpriority creditor's name and mailing addressGOLDBERG SEGALLA
ATTN: MICHAEL RUBIN, ESQ.
665 MAIN ST
BUFFALO, NY 14203**As of the petition filing date, the claim is:**

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 11,618.65

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.45 Nonpriority creditor's name and mailing addressGREAVES, ST. FORT, AND GIBBS
C/O EVANS D.P. & ASSOCIATES, P.C.
ATTN EVANS D. PRIESTON, ESQ.
2419 WESTCHESTER AVENUE
BRONX, NY 10461**As of the petition filing date, the claim is:**

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

Litigation Claim

\$ Unliquidated

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.46 Nonpriority creditor's name and mailing addressHALLETT'S BUILDING 4 SPE LLC
1 BRYANT PARK, 49TH FLOOR
NEW YORK, NY 10036**As of the petition filing date, the claim is:**

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 20,703.96

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.47 Nonpriority creditor's name and mailing addressHALLETT'S BUILDING 5 SPE LLC
1 BRYANT PARK, 49TH FLOOR
NEW YORK, NY 10036**As of the petition filing date, the claim is:**

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 14,856.91

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.48 Nonpriority creditor's name and mailing addressIRIS SHORIN
C/O JOHN C. DIGIOVANNA
20 PONDVIEW
PO BOX 639
ST. JAMES, NY 11780**As of the petition filing date, the claim is:**

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

Litigation Claim

\$ Unliquidated

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.49 Nonpriority creditor's name and mailing address

ITIMPACT
5759 W. HENDERSON
CHICAGO, IL 60634

As of the petition filing date, the claim is:*Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:General Trade Payable

\$ 4,650.00

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.50 Nonpriority creditor's name and mailing address

J-BAR REINFORCEMENT, INC.
46 EDGEMERE AVENUE
GREENWOOD LAKE, NY 10925

As of the petition filing date, the claim is:*Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:General Trade Payable

\$ 456,147.25

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.51 Nonpriority creditor's name and mailing address

JOES PEST CONTROL
1007 CARROLL STREET
BROOKLYN, NY 11225

As of the petition filing date, the claim is:*Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:General Trade Payable

\$ 150.00

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.52 Nonpriority creditor's name and mailing address

JORGE RINCON
C/O ZAREMBA BROWN PLLC
ATTN JOHN D. ZAREMBA
40 WALL STREET, 52ND FLOOR
NEW YORK, NY 10005

As of the petition filing date, the claim is:*Check all that apply.*

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:Litigation Claim

\$ Unliquidated

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.53 Nonpriority creditor's name and mailing address

KAREN CASH
C/O CURAN & AHLERS, L.L.P.
ATTN WILLIAM F. COSTELLO
14 MAMARONECK AVENUE
WHITE PLAINS, NY 10601

As of the petition filing date, the claim is:*Check all that apply.*

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:Litigation Claim

\$ Unliquidated

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.54 Nonpriority creditor's name and mailing address

LOCAL 282 FUNDS
C/O TRIVELLA & FORTE LLP
ATTN ARTHUR J. MULLER, III, ESQ.
1311 MAMARONECK AVENUE, STE. 170
WHITE PLAINS, NY 10605

As of the petition filing date, the claim is:*Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:Judgment Claim

\$ 281,228.55

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.55	Nonpriority creditor's name and mailing address LOCAL 282 FUNDS C/O TRIVELLA & FORTE LLP ATTN ARTHUR J. MULLER, III, ESQ. 1311 MAMARONECK AVENUE, STE. 170 WHITE PLAINS, NY 10605 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Judgment Claim Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 1,603,783.61
3.56	Nonpriority creditor's name and mailing address LOCAL 46 FUNDS C/O KENNEDY, JENNIK & MURRAY ATTN THOMAS KENNEDY, ESQ. 113 UNIVERSITY PLACE NEW YORK, NY 10003 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Judgment Claim Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 805,683.18
3.57	Nonpriority creditor's name and mailing address LOCAL 46 FUNDS C/O KENNEDY, JENNIK & MURRAY ATTN THOMAS KENNEDY, ESQ. 113 UNIVERSITY PLACE NEW YORK, NY 10003 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Judgment Claim Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 19,677,386.83
3.58	Nonpriority creditor's name and mailing address LOCAL 780 FUNDS C/O KENNEDY, JENNIK & MURRAY ATTN THOMAS M KENNEDY, ESQ 113 UNIVERSITY PLACE NEW YORK, NY 10003 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Judgment Claim Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 3,803,981.39
3.59	Nonpriority creditor's name and mailing address LOCAL 780 FUNDS C/O KENNEDY, JENNIK & MURRAY ATTN THOMAS M KENNEDY, ESQ 113 UNIVERSITY PLACE NEW YORK, NY 10003 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Judgment Claim Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 149,177.60
3.60	Nonpriority creditor's name and mailing address LUIGI CAPPELLINO C/O SACKS AND SACKS LLP ATTN KENNETH SACKS, ESQ. 150 BROADWAY, 4TH FLOOR NEW YORK, NY 10038 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Litigation Claim Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ Unliquidated

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.61 Nonpriority creditor's name and mailing address

MAJOR FIRE CONTROL
PO BOX 770914
WOODSIDE, NY 10019

As of the petition filing date, the claim is:*Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 1,747.88

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.62 Nonpriority creditor's name and mailing address

MANHATTAN DODGE
678 11TH AVE
NEW YORK, NY 10019

As of the petition filing date, the claim is:*Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

Auto Pymt Claim

\$ Unknown

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.63 Nonpriority creditor's name and mailing address

MCGIVNEY, MICHAEL
1923 LINDEN STREET
RIDGEWOOD, NY 11385

As of the petition filing date, the claim is:*Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 5,000.00

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.64 Nonpriority creditor's name and mailing address

MENDRICH CONSTRUCTION SERVICES
7521 6TH AVENUE
BROOKLYN, NY 11209

As of the petition filing date, the claim is:*Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 14,583.33

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.65 Nonpriority creditor's name and mailing address

MERCEDES-BENZ FINANCIAL
P.O. BOX 685
ROANOKE, TX 76262

As of the petition filing date, the claim is:*Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 2,290.00

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.66 Nonpriority creditor's name and mailing address

MTA
C/O FABINI, COHEN & HALL LLP
ATTN BRYAN TIGGS, ESQ.
570 LEXINGTON AVE, # 4
NEW YORK, NY 10022

As of the petition filing date, the claim is:*Check all that apply.*

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

Litigation Claim

\$ Unliquidated

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.67 Nonpriority creditor's name and mailing addressN.Y.S. LECET
33-11 35TH AVENUE
ASTORIA, NY 11106**As of the petition filing date, the claim is:**

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 33.70

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.68 Nonpriority creditor's name and mailing addressNASIR MEHMOOD
C/O JONATHON SILVER, ESQ.
80-02 KEW GARDENS ROAD, SUITE 316
KEW GARDENS, NY 11415**As of the petition filing date, the claim is:**

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

Litigation Claim

\$ Unliquidated

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.69 Nonpriority creditor's name and mailing addressNATIONAL GENERAL
PO BOX 3199
WINSTON SALEM, NC 27102-3199**As of the petition filing date, the claim is:**

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

Auto Pymt Claim Policy #2004809828

\$ 35,831.96

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.70 Nonpriority creditor's name and mailing addressNATIONAL GRID
1 METRO TECH CENTER #1
BROOKLYN, NY 11201**As of the petition filing date, the claim is:**

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 33,513.00

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.71 Nonpriority creditor's name and mailing addressNISSAN LIFT OF NEW YORK
603 CHESTNUT ST
GARDEN CITY, NY 11530**As of the petition filing date, the claim is:**

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 1,306.50

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.72 Nonpriority creditor's name and mailing addressNISSAN MOTOR ACCEPTANCE CORPORATION
INFINITI FINANCIAL SERVICES
PO BOX 660695
DALLAS, TX 75266-0695**As of the petition filing date, the claim is:**

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

Auto Pymt Claim Acct #00102472230320001

\$ Unknown

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.73 Nonpriority creditor's name and mailing address

NISSAN MOTOR ACCEPTANCE CORPORATION
INFINITI FINANCIAL SERVICES
PO BOX 660695
DALLAS, TX 75266-0695

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

\$ Unknown

Basis for the claim:

Auto Pymt Claim Acct #00102472234010001

Date or dates debt was incurred _____

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

3.74 Nonpriority creditor's name and mailing address

NISSAN MOTOR ACCEPTANCE CORPORATION
INFINITI FINANCIAL SERVICES
PO BOX 660695
DALLAS, TX 75266-0695

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

\$ Unknown

Basis for the claim:

Auto Pymt Claim Acct #00102472234820001

Date or dates debt was incurred _____

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

3.75 Nonpriority creditor's name and mailing address

NISSAN MOTOR ACCEPTANCE CORPORATION
INFINITI FINANCIAL SERVICES
PO BOX 660695
DALLAS, TX 75266-0695

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

\$ Unknown

Basis for the claim:

Auto Pymt Claim Acct #00102472229010001

Date or dates debt was incurred _____

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

3.76 Nonpriority creditor's name and mailing address

NISSAN MOTOR ACCEPTANCE CORPORATION
INFINITI FINANCIAL SERVICES
PO BOX 660695
DALLAS, TX 75266-0695

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

\$ Unknown

Basis for the claim:

Auto Pymt Claim Acct #00102472233040001

Date or dates debt was incurred _____

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

3.77 Nonpriority creditor's name and mailing address

NISSAN MOTOR ACCEPTANCE CORPORATION
INFINITI FINANCIAL SERVICES
PO BOX 660695
DALLAS, TX 75266-0695

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

\$ Unknown

Basis for the claim:

Auto Pymt Claim Acct #00102472238220001

Date or dates debt was incurred _____

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

3.78 Nonpriority creditor's name and mailing address

NISSAN MOTOR ACCEPTANCE CORPORATION
INFINITI FINANCIAL SERVICES
PO BOX 660695
DALLAS, TX 75266-0695

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

\$ Unknown

Basis for the claim:

Auto Pymt Claim Acct #00102472233420001

Date or dates debt was incurred _____

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.79 Nonpriority creditor's name and mailing address

NISSAN MOTOR ACCEPTANCE CORPORATION
INFINITI FINANCIAL SERVICES
PO BOX 660695
DALLAS, TX 75266-0695

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

\$ Unknown**Basis for the claim:**

Auto Pymt Claim Acct #00102472232070001

Date or dates debt was incurred _____

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

3.80 Nonpriority creditor's name and mailing address

NU-TECH PRODUCTS
135 OSER AVE
STE 1
HAUPPAUGE, NY 11788-3761

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 2,574.60**Basis for the claim:**

General Trade Payable

Date or dates debt was incurred _____

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

3.81 Nonpriority creditor's name and mailing address

NYC DEPARTMENT OF BUILDINGS
280 BROADWAY, 6TH FL
NEW YORK, NY 10007

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 35.00**Basis for the claim:**

General Trade Payable

Date or dates debt was incurred _____

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

3.82 Nonpriority creditor's name and mailing address

NYC DEPARTMENT OF FINANCE
PO BOX 3615
CHURCH STREET STATION
NEW YORK, NY 10008

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

\$ 17,522.13**Basis for the claim:**

Auto Pymt Claim Case No: 007764599

Date or dates debt was incurred _____

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

3.83 Nonpriority creditor's name and mailing address

NYC WATER BOARD
59-17 JUNCTION BLVD.
FLUSHING, NY 11373

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

\$ 975.00**Basis for the claim:**

General Trade Payable

Date or dates debt was incurred _____

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

3.84 Nonpriority creditor's name and mailing address

NYCHA
C/O LESTER SCHWAB KATZ & DWYER, LLP
ATTN THOMAS A. CATALANO, ESQ.
100 WALL STREET
NEW YORK, NY 10005

As of the petition filing date, the claim is:

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

\$ Unliquidated**Basis for the claim:**

Litigation Claim

Date or dates debt was incurred _____

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.85 Nonpriority creditor's name and mailing address ON CENTER SOFTWARE, INC. 8708 TECHNOLOGY FOREST PLACE, STE 175 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: General Trade Payable Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 5,443.76
3.86 Nonpriority creditor's name and mailing address PAYLESS SIGNS NY, LLC 6117 169TH STREET 3RD FLOOR FRESH MEADOWS, NY 11365 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: General Trade Payable Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 9,157.00
3.87 Nonpriority creditor's name and mailing address PECKAR & ABRAMSON 70 GRAND AVENUE RIVER EDGE, NJ 07661 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: General Trade Payable Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 11,512.50
3.88 Nonpriority creditor's name and mailing address POTAMKIN CADILLAC BUICK CHEVRON 706 11TH AVENUE NEW YORK, NY 10019 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Auto Pymt Claim VIN #: 1GYS4BKJ7HR113895 Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 103,939.20
3.89 Nonpriority creditor's name and mailing address RCN PO BOX 11816 NEWARK, NJ 07101 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: General Trade Payable Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 107.90
3.90 Nonpriority creditor's name and mailing address REGENCY RECYCLING CORP. 248-10 BROOKVILLE BLVD ROSEDALE, NY 11422 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: General Trade Payable Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 29,040.26

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.91 Nonpriority creditor's name and mailing addressRJS PROMO GROUP LTD
80 SKYLINE DRIVE
PLAINVIEW, NY 11803**As of the petition filing date, the claim is:**

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 6,369.46

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.92 Nonpriority creditor's name and mailing addressRUNAWAY TIRE SERVICE
41-15 19TH AVENUE
ASTORIA, NY 11105**As of the petition filing date, the claim is:**

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 777.64

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.93 Nonpriority creditor's name and mailing addressSAFEWAY SERVICES, INC.
3131 123RD
FLUSHING, NY 11354**As of the petition filing date, the claim is:**

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 2,400.00

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.94 Nonpriority creditor's name and mailing addressSCHANKER AND HOCHBERG, P.C
27 WEST NECK ROAD
P.O. BOX 1905
HUNTINGTON, NY 11743**As of the petition filing date, the claim is:**

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 7,125.00

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.95 Nonpriority creditor's name and mailing addressSDGNY
33-26 NORTHERN BLVD
L.I.C., NY 11101**As of the petition filing date, the claim is:**

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 160.00

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.96 Nonpriority creditor's name and mailing addressSEE THAT GIRL'S CLEANING
162 NAVY WALK, 6C
BROOKLYN, NY 11201**As of the petition filing date, the claim is:**

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 1,260.00

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.97 Nonpriority creditor's name and mailing address

SPECTRUM BUSINESS
400 ATLANTIC ST
STAMFORD, CT 06901

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 1,683.16

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.98 Nonpriority creditor's name and mailing address

SPEEDO CORP
1958 HAIGHT AVE
BRONX, NY 10461

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 2,616.95

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.99 Nonpriority creditor's name and mailing address

SPRINT
6391 SPRINT PARKWAY
OVERLAND PARK, KS 66251-4300

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 3,266.68

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.100 Nonpriority creditor's name and mailing address

SR CRANDALL INC.
26 DOMINICA DR.
ENGLEWOOD, FL 34223

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 1,525.00

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.101 Nonpriority creditor's name and mailing address

STAPLES
5812 QUEENS BLVD
STE 2
WOODSIDE, NY 11377-7766

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 1,283.84

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.102 Nonpriority creditor's name and mailing address

STAPLES BUSINESS ADVANTAGE
PO BOX 415256
BOSTON, MA 00241-5256

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 3,388.65

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.103 Nonpriority creditor's name and mailing address

STATE FARM INSURANCE
248-26 JERICHO TURNPIKE
FLORAL PARK, NY 11001-4002

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 254.59

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.104 Nonpriority creditor's name and mailing address

STRATEGIC RESPONSE SYSTEMS
2020 CAMINO DEL RIO N STE 505
SAN DIEGO, CA 92108

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 4,770.00

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.105 Nonpriority creditor's name and mailing address

TGI OFFICE AUTO
120 3RD STREET
BROOKLYN, NY 11231

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 1,638.59

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.106 Nonpriority creditor's name and mailing address

THE MARINO ORGANIZATION INC.
747 THIRD AVENUE, 18TH FLOOR
NEW YORK, NY 10017

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

General Trade Payable

\$ 7,500.00

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.107 Nonpriority creditor's name and mailing address

TRANSWORLD SYSTEMS INC
5626 FRANTZ ROAD
DUBLIN, OH 43107

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

Auto Pymt Claim Acct #66276992

\$ 4,727.00

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.108 Nonpriority creditor's name and mailing address

TRANSWORLD SYSTEMS INC
5626 FRANTZ ROAD
DUBLIN, OH 43107

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Basis for the claim:

Auto Pymt Claim Acct #65202811

\$ 4,727.00

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.109 Nonpriority creditor's name and mailing address

TRI STATE SHEARING & BENDING, INC.

As of the petition filing date, the claim is:*Check all that apply.*

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:Litigation Claim\$ Unliquidated

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.110 Nonpriority creditor's name and mailing address

US BANK NA

As of the petition filing date, the claim is:*Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:General Trade Payable\$ 994.30

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.111 Nonpriority creditor's name and mailing address

VERIZON
 PO BOX 4003
 ACWORTH, GA 30101

As of the petition filing date, the claim is:*Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:General Trade Payable\$ 7,330.08

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.112 Nonpriority creditor's name and mailing address

WEEKS LERMAN
 58-38 PAGE PLACE
 MASPETH, NY 11378

As of the petition filing date, the claim is:*Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:General Trade Payable\$ 5,236.82

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

3.113 Nonpriority creditor's name and mailing address

WORLDWIDE EXPRESS
 267 5TH AVE BSMT 1
 NEW YORK, NY 10016

As of the petition filing date, the claim is:*Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:General Trade Payable\$ 77.40

Date or dates debt was incurred _____

Last 4 digits of account number _____

Is the claim subject to offset?

- ☒ No
☐ Yes

Part 3:**List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1.	PECKAR & ABRAMSON PC ATTN HOWARD ROSEN 41 MADISON AVENUE, 20TH FLOOR NEW YORK, NY 10010	Line <u>3.87</u> <input type="checkbox"/> Not listed. Explain _____	____ _

Part 4:**Total Amounts of the Priority and Nonpriority unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

Total of claim amounts

5a. **Total claims from Part 1**

5a. \$ 2,443,942.59

5b. **Total claims from Part 2**

5b. + \$ 83,467,833.36

5c. **Total of Parts 1 and 2**

Lines 5a + 5b = 5c

5c. \$ 85,911,775.95

Fill in this information to identify the case:

Debtor name Navillus Tile, Inc.

United States Bankruptcy Court for the: Southern District of New York

Case number (If known): 17-13162 (SHL) Chapter 11

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

- ☐ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
- ☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases.

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Collective Bargaining Agreement (A0004) Nature of Debtor's Interest: Employer</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>4 CEMENT & CONCRETE WORKERS OF NYC, L6A, 18A, L20 30-56 WHITESTONE EXPY FLUSHING, NY 11354</p>
2.2	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Office Space Lease (A0031) Nature of Debtor's Interest: Lessee</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>633 3RD AVENUE PROPERTY OWNER LLC 633 3RD AVE 17TH FL NEW YORK, NY 10017</p>
2.3	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>General Construction re: Smith House (00161) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>AALCO TRANSPORT & STORAGE INC 55 ENGINEERS LANE SUITE 4 FARMINGDALE, NY 11735</p>
2.4	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>General Construction Contract re: Astoria Houses (00126) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>AALCO TRANSPORT & STORAGE INC 55 ENGINEERS LANE SUITE 4 FARMINGDALE, NY 11735</p>
2.5	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Construction Agreement re: Construction Material Storage (00150) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>AALCO TRANSPORT & STORAGE, INC 55 ENGINEERS LANE SUITE #4 FARMINGDALE, NY 11735</p>

Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

List all contracts and unexpired leases.

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.6	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Construction Agreement re: Installation Of Emergency Generators And HSCIP (00151) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>ACS SYSTEM ASSOCIATES, INC. 160 WEST LINCOLN AVENUE MOUNT VERNON, NY 10550</p>
2.7	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>General Construction re: Smith House (00162) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>ACS SYSTEMS ASSOCIATES, INC 160 WEST LINCOLN AVE MOUNT VERNON, NY 10550</p>
2.8	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>General Construction Contract re: Astoria Houses (00127) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>ACS SYSTEMS ASSOCIATES, INC 160 WEST LINCOLN AVE MOUNT VERNON, NY 10550</p>
2.9	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Umbrella Policy Premium Finance Agreement (A0034) Nature of Debtor's Interest: Purchaser</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>AFCO CREDIT CORPORATION 14 WALL STREET, STE. 8A-19 NEW YORK, NY 10005</p>
2.10	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>General Construction Contract re: Hurricane Sandy Residential Community Recovery Package #21 (00135) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>AIR MASTERS, INC 1935 RICHMOND TERRACE STATEN ISLAND, NY 10302</p>
2.11	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>General Construction Contract re: Hurricane Sandy Residential Community Recovery Package #33 (00141) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>AIR MASTERS, INC 1935 RICHMOND TERRACE STATEN ISLAND, NY 10302</p>
2.12	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>General Construction Contract re: Hurricane Sandy Residential Community Recovery Package #22 (00138) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>AIR MASTERS, INC 1935 RICHMOND TERRACE STATEN ISLAND, NY 10302</p>

Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

List all contracts and unexpired leases.

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.13	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Utility Contract (A0035) Nature of Debtor's Interest: Purchaser</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>AT&T 208 SOUTH AKARD STREET DALLAS, TX 75202</p>
2.14	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Purchase Agreement re: Rebar and Wire Mesh (00294) Nature of Debtor's Interest: Purchaser</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>BARKER STEEL LLC 1700 RIVERSIDE DR BETHLEHEM, PA 18015</p>
2.15	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Construction Materials Agreement re: Concrete Reinforcing Steel Institute (00288) Nature of Debtor's Interest: Purchaser</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>BARKER STEEL LLC 1700 RIVERSIDE DR BETHLEHEM, PA 18015</p>
2.16	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Project Labor Agreement for Manhattan West Properties (A0129) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>BOP NE LLC C/O BROOKFIELD FINANCIAL PROP. ET AL</p>
2.17	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Collective Bargaining Agreement (A0001) Nature of Debtor's Interest: Employer</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>BRICKLAYERS AND ALLIED CRAFTWORKERS, L1 4 CT SQUARE W #1 LONG ISLAND CITY, NY 11101</p>
2.18	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Trade Contract re: 33 Whitehall (00201) Nature of Debtor's Interest: Subcontractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>BROAD FINANCIAL CENTER, LLC ATTN: ALEX STAWSKI/ANTHONY LEICHTER 565 FIFTH AVE NEW YORK, NY 10036</p>
2.19	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Subcontractor Agreement for Construction Work (00143) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>BROWNIE COMPANIES OF LONG ISLAND LLC. 38 CHAPEL AVENUE PATCHOGUE, NY 11772</p>

Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

List all contracts and unexpired leases.

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.20 State what the contract or lease is for and the nature of the debtor's interest Multiemployer Collective Bargaining Agreement (A0036)
 Nature of Debtor's Interest: Employer BUILDING AND CONSTRUCTION TRADES COUNCIL
 71 W 23RD ST, STE 501-03
 NEW YORK, NY 10010

State the term remaining

List the contract number of any government contract

2.21 State what the contract or lease is for and the nature of the debtor's interest Negotiation and administration of CBAs (A0119)
 Nature of Debtor's Interest: Purchaser BUILDING CONTRACTORS ASSOCIATION
 451 PARK AVENUE SOUTH
 NEW YORK, NY 10016

State the term remaining

List the contract number of any government contract

2.22 State what the contract or lease is for and the nature of the debtor's interest Service Contract re: Waste Removal (00145)
 Nature of Debtor's Interest: Purchaser CARDELLA TRUCKING CO., INC

State the term remaining

List the contract number of any government contract

2.23 State what the contract or lease is for and the nature of the debtor's interest Purchase Agreement re: Redimix Concrete (00295)
 Nature of Debtor's Interest: Purchaser CASA REDIMIX CONCRETE
 886 EDGEWATER RD
 BRONX, NY 10474

State the term remaining

List the contract number of any government contract

2.24 State what the contract or lease is for and the nature of the debtor's interest Subcontract Agreement (00183)
 Nature of Debtor's Interest: Subcontractor CAULDWELL WINGATE COMPANY, LLC
 380 LEXINGTON AVENUE
 NEW YORK, NY 10168

State the term remaining

List the contract number of any government contract

2.25 State what the contract or lease is for and the nature of the debtor's interest Collective Bargaining Agreement (A0005)
 Nature of Debtor's Interest: Employer CEMENT AND CONCRETE WORKES OF NYC, 18A
 4235 KATONAH AVE
 BRONX, NY 10470

State the term remaining

List the contract number of any government contract

2.26 State what the contract or lease is for and the nature of the debtor's interest Collective Bargaining Agreement (A0006)
 Nature of Debtor's Interest: Employer CEMENT AND CONCRETE WORKES OF NYC, L20
 3636 33RD ST #302
 QUEENS, NY 11106

State the term remaining

List the contract number of any government contract

Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

List all contracts and unexpired leases.

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.27	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Collective Bargaining Agreement (A0007) Nature of Debtor's Interest: Employer</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CEMENT MASONS, L780 15050 14TH RD #4 WHITESTONE, NY 11357</p>
2.28	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Concrete Steel Mesh Agreement (00146) Nature of Debtor's Interest: Purchaser</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CFS STEEL PO BOX 7777 PHILADELPHIA, PA 19175-0341</p>
2.29	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Concrete Work at 701 7th Ave (A0038) Nature of Debtor's Interest: Subcontractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CNY CONSTRUCTION 701 LLC 214 WEST 39TH STREET, STE. 804 NEW YORK, NY 10018</p>
2.30	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Electrical Services Contract (A0039) Nature of Debtor's Interest: Purchaser</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CON EDISON COOPER STATION P.O. BOX 138 NEW YORK, NY 10276-0138</p>
2.31	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Brokerage Agreement (A0040) Nature of Debtor's Interest: Insured</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CONSTRUCTION RISK PARTNERS 252 W 37TH ST, STE 200E NEW YORK, NY 10018</p>
2.32	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>General Construction Contract re: Hurricane Sandy Residential Community Recovery Package #22 (00139) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CORNERSTONE CARPENTRY LIMITED 15 WESTMORELAND DRIVE YONKERS, NY 10704</p>
2.33	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>General Construction Contract re: Hurricane Sandy Residential Community Recovery Package #21 (00136) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CORNERSTONE CARPENTRY LIMITED 15 WESTMORELAND DRIVE YONKERS, NY 10704</p>

Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

List all contracts and unexpired leases.

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.34	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Subcontractor Agreement for Construction Work (00144) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CORNERSTONE CARPENTRY LIMITED INC. 15 WESTMORELAND DRIVE YONKERS, NY 10704</p>
2.35	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Rental Agreement for TADANO GR150-XL crane (A0114) Nature of Debtor's Interest: Lessee</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CRANES, INC. 53-20 44TH ST MASPETH, NY 11378</p>
2.36	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Equipment Lease (A0041) Nature of Debtor's Interest: Lessee</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>DE LAGE FINANCIAL SERVICES, INC. 1111 OLD EAGLE SCHOOL RD WAYNE, PA 19087</p>
2.37	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Consulting Agreement re: acquisition of De-Watering Permit (00283) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>DESIGN 2147 LIMITED 52 DIAMOND ST BROOKLYN, NY 11222</p>
2.38	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Pest Control Service Agreement (00284) Nature of Debtor's Interest: Purchaser</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>DIAL A BUG PEST CONTROL 548 CHERRY LN FLORAL PARK, NY 11001</p>
2.39	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>General Construction Contract re: Astoria Houses (00128) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>DIMITRI ENTERPRISES, INC 151 21ST STREET BROOKLYN, NY 11232</p>
2.40	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>General Construction re: Smith House (00163) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>DIMITRI ENTERPRISES, INC 151 21ST STREET BROOKLYN, NY 11232</p>

Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

List all contracts and unexpired leases.

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.41	<p>State what the contract or lease is for and the nature of the debtor's interest</p>	<p>Construction Agreement re: Roofing Replacement And Exterior Restoration Work (00156) Nature of Debtor's Interest: Contractor</p>	<p>DIMITRI ENTERPRISES, INC. 135 58TH STREET BROOKLYN, NY 10017</p>
	<p>State the term remaining</p> <p>List the contract number of any government contract</p>		
2.42	<p>State what the contract or lease is for and the nature of the debtor's interest</p>	<p>Construction Agreement re: Installation Of Emergency Generators And HSCIP (00152) Nature of Debtor's Interest: Contractor</p>	<p>DIMITRI ENTERPRISES, INC. 151 21ST STREET BROOKLYN, NY 11232</p>
	<p>State the term remaining</p> <p>List the contract number of any government contract</p>		
2.43	<p>State what the contract or lease is for and the nature of the debtor's interest</p>	<p>Rental Agreement re: Crane Equipment (00293) Nature of Debtor's Interest: Lessee</p>	<p>DOKA USA LTD. 214 GATES RD LITTLE FERRY, NJ 07643</p>
	<p>State the term remaining</p> <p>List the contract number of any government contract</p>		
2.44	<p>State what the contract or lease is for and the nature of the debtor's interest</p>	<p>Rental Agreement re: Crane Equipment (00280) Nature of Debtor's Interest: Lessee</p>	<p>DOKA USA LTD. 208 GATES RD LITTLE FERRY, NJ 07643</p>
	<p>State the term remaining</p> <p>List the contract number of any government contract</p>		
2.45	<p>State what the contract or lease is for and the nature of the debtor's interest</p>	<p>Purchase Agreement for Doka Table Lifting System (A0115) Nature of Debtor's Interest: Purchaser</p>	<p>DOKA USA, LTD 208 GATES RD LITTLE FERRY, NJ 07643</p>
	<p>State the term remaining</p> <p>List the contract number of any government contract</p>		
2.46	<p>State what the contract or lease is for and the nature of the debtor's interest</p>	<p>Purchase Agreement re: Crane Equipment (00147) Nature of Debtor's Interest: Purchaser</p>	<p>DOKA USA, LTD. 208 GATES ROAD LITTLE FERRY, NJ 07643</p>
	<p>State the term remaining</p> <p>List the contract number of any government contract</p>		
2.47	<p>State what the contract or lease is for and the nature of the debtor's interest</p>	<p>General Construction Contract re: Astoria Houses (00129) Nature of Debtor's Interest: Contractor</p>	<p>E. FITZGERALD ELECTRIC CO. INC. 633 3RD AVE 17TH FLOOR SUITE 1729 NEW YORK, NY 10017</p>
	<p>State the term remaining</p> <p>List the contract number of any government contract</p>		

Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

List all contracts and unexpired leases.

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.48	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Subcontract Agreement (00197) Nature of Debtor's Interest: Subcontractor</p>	<p>E.E. CRUZ AND TULLY CONSTRUCTYION CO., A JOINT VENTURE, LLC 32 AVENUE OF THE AMERICAS 13 TH FLOOR NEW YORK, NY 10013</p>
	<p>State the term remaining</p> <p>List the contract number of any government contract</p>	
2.49	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Subcontractor Agreement for Temporary Fencing Work (00142) Nature of Debtor's Interest: Contractor</p>	<p>EAGLE FENCE CORP. 66 BROADWAY STATEN ISLAND, NY 10310</p>
	<p>State the term remaining</p> <p>List the contract number of any government contract</p>	
2.50	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>General Construction re: Smith House (00164) Nature of Debtor's Interest: Contractor</p>	<p>ETS CONTRACTING INC 160 CLAY STREET BROOKLYN, NY 11222</p>
	<p>State the term remaining</p> <p>List the contract number of any government contract</p>	
2.51	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Yard Lease (A0043) Nature of Debtor's Interest: Sublessee</p>	<p>FAMITECH, INC. 15 WEST 46TH STREET NEW YORK, NY 10036</p>
	<p>State the term remaining</p> <p>List the contract number of any government contract</p>	
2.52	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Concrete Distribution and Pricing Agreement (00296) Nature of Debtor's Interest: Purchaser</p>	<p>FERRARA BROS P.O. BOX 541489, 120-05 31ST AVE FLUSHING, NY 11354-2516</p>
	<p>State the term remaining</p> <p>List the contract number of any government contract</p>	
2.53	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Purchase Agreement re: Concrete (00148) Nature of Debtor's Interest: Purchaser</p>	<p>FERRERA BROS PO BOX 419248 BOSTON, MA 02241-9248</p>
	<p>State the term remaining</p> <p>List the contract number of any government contract</p>	
2.54	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Consulting Agreement (A0112) Nature of Debtor's Interest: Purchaser</p>	<p>FIROMAR, INC. 337 KNOLLWOOD AVE DOUGLASTON, NY 11363</p>
	<p>State the term remaining</p> <p>List the contract number of any government contract</p>	

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2.55	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Ceramic/Glass Tile Subcontract re: Grand Central Terminal (00133) Nature of Debtor's Interest: Subcontractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>GCT CONSTRUCTORS JV 150 MEADOWLANDS PARKWAY 2ND FLOOR SECAUCUS, NJ 7094-1589</p>
2.56	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Construction Access Contract re: Grand Central Terminal Concourse and Facilities (00118) Nature of Debtor's Interest: Subcontractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>GCT CONSTRUCTORS JV 150 MEADOWLANDS PARKWAY THIRD FLOOR SECAUCUS, NJ 07094-1589</p>
2.57	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Pre-construction Survey Agreement (00282) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>GEO INSTRUMENTS: A DIVISION OF GETEC 24 CELESTIAL DR NARRAGANSETT, RI 02882</p>
2.58	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Subcontract re: NY Presbyterian Hospital (00171) Nature of Debtor's Interest: Subcontractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>GILBANE BUILDING COMPANY 88 PINE STREET 27TH FLOOR NEW YORK, NY 10005</p>
2.59	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Construction Work at 55 Hudson Yards (A0044) Nature of Debtor's Interest: Subcontractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>GILBANE BUILDING COMPANY 88 PINE STREET, 27TH FLOOR NEW YORK, NY 10005</p>
2.60	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Yard Lease (A0046) Nature of Debtor's Interest: Lessee</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>HALLETTS BUILDING 4 SPE LLC C/O ROYAL REALTY CORP. ONE BRYANT PARK NEW YORK, NY 10036</p>
2.61	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Yard Lease (A0045) Nature of Debtor's Interest: Lessee</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>HALLETTS BUILDING 5 SPE LLC C/O ROYAL REALTY CORP. ONE BRYANT PARK NEW YORK, NY 10036</p>

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2.62	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Subcontract Agreement (00190) Nature of Debtor's Interest: Subcontractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>HUNTERS ROBERT CONSTRUCTION GROUP, LLC ATTN TIMOTHY DILLON, DIRECTOR OF PURCHASING/VP</p>
2.63	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Subcontract Agreement (00175) Nature of Debtor's Interest: Subcontractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>HUNTERS ROBERT CONSTRUCTION GROUP, LLC ATTN KEVIN BARRETT (EVP)</p>
2.64	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Subcontract re: PS56 (X) Addition Project (00194) Nature of Debtor's Interest: Subcontractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>IANNELLI CONSTRUCTION CO., INC 9723 3 RD AVENUE BROOKLYN, NY 11209</p>
2.65	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Collective Bargaining Agreement (A0008) Nature of Debtor's Interest: Employer</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>INTERNATIONAL UNION OF OPERATING ENGINEERS, L14 141-57 NORTHERN BLVD FLUSHING, NY 11354</p>
2.66	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Subcontractor Agreement re: Hurricane Sandy Residential Community Recovery Package #33 (00351) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>JAMCOB ELECTRIC LLC 1476 ST PETERS ST BRONX, NY 10461</p>
2.67	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Purchase Agreement (A0116) Nature of Debtor's Interest: Purchaser</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>JBAR 46 EDGEMERE AVE GREENWOOD LAKE, NY 10925</p>
2.68	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Construction Agreement re:NYCTA contract No C-26512 (00196) Nature of Debtor's Interest: Subcontractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>JOHN P.PICONE, INC 31 GARDEN LANE PO BOX 9013 LAWRENCE, NY 11559</p>

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2.69	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Construction Agreement (00168) Nature of Debtor's Interest: Subcontractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>JOHN P. PICONE, INC 31 GARDEN LANE PO BOX 9013 LAWRENCE, NY 11559</p>
2.70	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Construction Agreement re: Concrete Masonry (00227) Nature of Debtor's Interest: Subcontractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>JRM CONSTRUCTION MANAGEMENT 242 WEST 36TH ST, 9TH FL NEW YORK, NY 10018</p>
2.71	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Master Subcontractor Agreement (00179) Nature of Debtor's Interest: Subcontractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>JRM CONSTRUCTION MANAGEMENT, LLC 242 WEST 36 TH STREET, 9 TH FI NEW YORK, NY 10018</p>
2.72	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Standard Subcontract (00182) Nature of Debtor's Interest: Subcontractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>JUDLAU CONTRACTING, INC 25-15 ULMER STREET COLLEGE POINT, NY 11354</p>
2.73	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Liquidating Agreement (00276) Nature of Debtor's Interest: Subcontractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>JUDLAU CONTRACTING, INC.</p>
2.74	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Subcontractor Agreement re: Hurricane Sandy Residential Community Recovery Package #33 (00360) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>JVN RESTORATION, INC. 47 FOSTER RD STATEN ISLAND, NY 10309</p>
2.75	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Subcontractor Agreement re: Hurricane Sandy Residential Community Recovery Package #22 (00357) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>JVN RESTORATION, INC. 47 FOSTER RD STATEN ISLAND, NY 10309</p>

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2.76	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Subcontractor Agreement re: Hurricane Sandy Residential Community Recovery Package #21 (00353) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>JVN RESTORATION, INC. 47 FOSTER RD STATEN ISLAND, NY 10309</p>
2.77	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Equipment Rental Agreement (A0111) Nature of Debtor's Interest: Lessor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>KERRY LEASING, LLC 633 3RD AVE, 17TH FL NEW YORK, NY 10017</p>
2.78	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Subcontractor Agreement (A0113) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>KG POWER SYSTEMS 150 LASER CT HAUPPAUGE, NY 11788</p>
2.79	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Copier Lease (A0052) Nature of Debtor's Interest: Lessee</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>KONICA MINOLTA BUSINESS SOLUTIONS 10201 CENTURION PARKWAY N., STE. 100 JACKSONVILLE, FL 32256</p>
2.80	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Copier Lease (A0053) Nature of Debtor's Interest: Lessee</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>KONICA MINOLTA PREMIER FINANCE 10201 CENTURION PARKWAY NORTH, STE. 100 JACKSONVILLE, FL 32256</p>
2.81	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Project Labor Agreement for 250 East 57th St (A0131) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>LEND LEASE (US) CONSTRUCTION LMB INC 200 PARK AVE NEW YORK, NY 10166</p>
2.82	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Project Labor Agreement for Columbia Academic Mixed-Used Development (A0127) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>LEND LEASE (US) CONSTRUCTION LMB INC, ET AL 200 PARK AVE NEW YORK, NY 10166</p>

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2.83	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Construction Agreement with Lend Lease (00193) Nature of Debtor's Interest: Subcontractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>LEND LEASE (US) CONSTRUCTION LMB, INC 200 PARK AVENUE NEW YORK, NY 10166</p>
2.84	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Renovation of IS 323 (A0054) Nature of Debtor's Interest: Purchaser</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>LEON DEMATTEIS CONSTRUCTION CORP. 820 ELMONT ROAD ELMONT, NY 11003</p>
2.85	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>General Indemnity Agreement (A0055) Nature of Debtor's Interest: Insured</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>LIBERTY MUTUAL INSURANCE COMPANY 2200 RENAISSANCE BLVD., SUITE 400 KING OF PRUSSIA, PA 19406-2755</p>
2.86	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Bonds for Multiple Construction Contracts (A00086) Nature of Debtor's Interest: Purchaser</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>LIBERTY MUTUAL INSURANCE COMPANY 2200 RENAISSANCE BLVD, SUITE 400 KING OF PRUSSIA, PA 19406-2755</p>
2.87	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Collective Bargaining Agreement (A0013) Nature of Debtor's Interest: Employer</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>LIUNA CONSTRUCTION & GENERAL BLDG LABORERS, L79 520 EIGHTH AVE #679 NEW YORK, NY 10018</p>
2.88	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Automotive Lease (A0056) Nature of Debtor's Interest: Lessee</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>MANHATTAN JEEP CHRYSLER DODGE, INC. 678 11TH AVENUE NEW YORK, NY 10019</p>
2.89	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Rental Agreement for Belt (A0117) Nature of Debtor's Interest: Lessee</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>MANHATTAN TOOL REPAIR, INC. 22-09 41ST AVE LONG ISLAND CITY, NY 11011</p>

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2.90	State what the contract or lease is for and the nature of the debtor's interest	Sublease Agreement (A0120) Nature of Debtor's Interest: Lessee	MANHATTAN TOOL REPAIR, INC. 22-09 41ST AVE L.I.C., NY 11101
	State the term remaining List the contract number of any government contract		
2.91	State what the contract or lease is for and the nature of the debtor's interest	Umbrella (\$2M x P) Policy # MKLM1EUL100066 (A0024) Nature of Debtor's Interest: Insured	MARKEL AMERICAN INSURANCE COMPANY 4521 HIGHWOODS PARKWAY GLEN ALLEN, VA 23060
	State the term remaining List the contract number of any government contract		
2.92	State what the contract or lease is for and the nature of the debtor's interest	Automotive Lease (A0058) Nature of Debtor's Interest: Lessee	MASERATI OF MANHATTAN 1 YORK ST NEW YORK, NY 10013
	State the term remaining List the contract number of any government contract		
2.93	State what the contract or lease is for and the nature of the debtor's interest	Subcontract Agreement re: Facade Stonework at WTC Streets (00169) Nature of Debtor's Interest: Subcontractor	MASTERPIERTO-FRADE, LLC ATTN ATTORNEYS FOR OLIVEIRA CONTRACTING, INC THE CHANCERY 190 WILLIS AVENUE MINEOLA, NY 11501
	State the term remaining List the contract number of any government contract		
2.94	State what the contract or lease is for and the nature of the debtor's interest	Construction Agreement re: Installation Of Emergency Generators And HSCIP (00153) Nature of Debtor's Interest: Contractor	MECO ELECTRIC, CO., INC. 56 WEST STREET STATEN ISLAND, NY 10310
	State the term remaining List the contract number of any government contract		
2.95	State what the contract or lease is for and the nature of the debtor's interest	Purchase Agreement re: Rebar (00297) Nature of Debtor's Interest: Purchaser	MEN OF STEEL ENTERPRISES LLC 555 STATE RD SUITE 101 BENSALEM, PA 19020
	State the term remaining List the contract number of any government contract		
2.96	State what the contract or lease is for and the nature of the debtor's interest	Automotive Lease (A0059) Nature of Debtor's Interest: Lessee	MERCEDES BENZ OF BROOKLYN 1800 SHORE PARKWAY BROOKLYN, NY 11214
	State the term remaining List the contract number of any government contract		

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2.97	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Collective Bargaining Agreement (A0014) Nature of Debtor's Interest: Employer</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>METALLIC LATHERS AND REINFORCING IRONWORKERS, L46 1322 3RD AVE NEW YORK, NY 10021</p>
2.98	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Professional Surveying Services Agreement re: Redfern Houses project in Queens, New York (00279) Nature of Debtor's Interest: Purchaser</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>MFS CONSULTING ENGINEERS AND SURVEYOR, DPC 31 W. 34TH ST SUITE 7071 NEW YORK, NY 10001</p>
2.99	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Commercial Vehicle Policy (A0118) Nature of Debtor's Interest: Insured</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>NATIONAL GENERAL INSURANCE PO BOX 3199 WINSTON SALEM, NC 27102</p>
2.100	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Project Labor Agreement for Multiple Locations (A0128) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>NEW YORK CITY HOUSING AUTHORITY 250 BROADWAY NEW YORK, NY 10007</p>
2.101	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Construction Agreement for Multiple Locations (00173) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>NEW YORK CITY HOUSING AUTHORITY 250 BROADWAY NEW YORK, NY 10007</p>
2.102	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Project Labor Agreement for Fiscal years 2015-2019 (A0133) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>NEW YORK CITY SCHOOL CONSTRUCTION AUTHORITY</p>
2.103	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Collective Bargaining Agreement (A0003) Nature of Debtor's Interest: Employer</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>NYC DISTRICT COUNCIL OF CARPENTERS, L157 AND 1156 395 HUDSON ST #9 NEW YORK, NY 10014</p>

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2.104	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Warranty Liability (A0063) Nature of Debtor's Interest: Insured</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>O'SULLIVAN INSURANCE GROUP LLC C/O JLT TOWNER MANAGEMENT (USA) LLC 148 COLLEGE STREET, SUITE 204 BURLINGTON, VT 05401</p>
2.105	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Liquidated Damages Liability (A0125) Nature of Debtor's Interest: Insured</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>O'SULLIVAN INSURANCE GROUP LLC C/O JLT TOWNER MANAGEMENT (USA) LLC 148 COLLEGE STREET, SUITE 204 BURLINGTON, VT 05401</p>
2.106	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Rework Liability, Liquidated Damages Liability (A0124) Nature of Debtor's Interest: Insured</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>O'SULLIVAN INSURANCE GROUP LLC C/O JLT TOWNER MANAGEMENT (USA) LLC 148 COLLEGE STREET, SUITE 204 BURLINGTON, VT 05401</p>
2.107	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Professional Liability/Pollution Deductible Reimbursement (A0123) Nature of Debtor's Interest: Insured</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>O'SULLIVAN INSURANCE GROUP LLC C/O JLT TOWNER MANAGEMENT (USA) LLC 148 COLLEGE STREET, SUITE 204 BURLINGTON, VT 05401</p>
2.108	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Workers Compensation Starr Deductible Reimbursement (A0122) Nature of Debtor's Interest: Insured</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>O'SULLIVAN INSURANCE GROUP LLC C/O JLT TOWNER MANAGEMENT (USA) LLC 148 COLLEGE STREET, SUITE 204 BURLINGTON, VT 05401</p>
2.109	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>General Liability Starr Deductible Reimbursement (A0121) Nature of Debtor's Interest: Insured</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>O'SULLIVAN INSURANCE GROUP LLC C/O JLT TOWNER MANAGEMENT (USA) LLC 148 COLLEGE STREET, SUITE 204 BURLINGTON, VT 05401</p>
2.110	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Subcontract Agreement re: Facade Stonework at WTC Streets (00169) Nature of Debtor's Interest: Subcontractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>OLIVEIRA CONTRACTING, INC ATTN ATTORNEYS FOR OLIVIVEIRA CONTRACTING, INC 15 ALBERTSON AVENUE ALBERTSON, NY 11507</p>

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2.111	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Collective Bargaining Agreement (A0009) Nature of Debtor's Interest: Employer</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>OPERATING ENGINEERS AND SURVEYORS, L15, 15D 138 44-40 11TH ST LONG ISLAND CITY, NY 11101</p>
2.112	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>License Agreement for Access to myPERI (00292) Nature of Debtor's Interest: Purchaser</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>PERI FORMWORK SYSTEMS 355 MURRAY HILL PKWY SUITE 204 EAST RUTHERFORD, NJ 07073</p>
2.113	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Rental Agreement re: ACS 400 Platform (00289) Nature of Debtor's Interest: Lessee</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>PERI FORMWORK SYSTEMS 355 MURRAY HILL PKWY SUITE 204 EAST RUTHERFORD, NJ 07073</p>
2.114	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Collective Bargaining Agreement (A0015) Nature of Debtor's Interest: Employer</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>PLASTERERS, L1 AND L262 3233 LACONIA AVE BRONX, NY 10469</p>
2.115	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Project Labor Agreement for 41 East 22nd Street (A0130) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>PLAZA CONSTRUCTION CORP 1065 AVENUE OF THE AMERICAS NEW YORK, NY 10018</p>
2.116	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Construction Agreement re: Target Express - T3236 Freeport (00208) Nature of Debtor's Interest: Subcontractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>PLAZA CONSTRUCTION LLC ATTN RICHARD WOOD 1065 AVENUE OF THE AMERICAS 7TH FLOOR NEW YORK, NY 10018</p>
2.117	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Construction Agreement re: Target Express - T3236 Freeport (00207) Nature of Debtor's Interest: Subcontractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>PLAZA CONSTRUCTION LLC ATTN RICHARD WOOD 1065 AVENUE OF THE AMERICAS 7TH FLOOR NEW YORK, NY 10018</p>

Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

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2.118	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Construction Agreement (00205) Nature of Debtor's Interest: Subcontractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>PLAZA CONSTRUCTION LLC 1065 AVENUE OF THE AMERICAS 7TH FLOOR NEW YORK, NY 10018</p>
2.119	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Subcontract Agreement (A0066) Nature of Debtor's Interest: Subcontractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>POSILLICO CIVIL, INC. 1750 NEW HIGHWAY FARMINGDALE, NY 11735</p>
2.120	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Trailer Pump and Placing Boom Rental Agreement (00286) Nature of Debtor's Interest: Purchaser</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>PRECISION CONCRETE PUMPING INC. 1 PROSPECT AVE ALBANY, NY 12206</p>
2.121	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Construction Management Agreement re: One WTC - 2016 CM on-call services (00198) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>ROYAL 1 WTC MANAGEMENT, LLC</p>
2.122	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>General Indemnity Agreement (A0068) Nature of Debtor's Interest: Insured</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>SAFECO INSURANCE CORPORATION P.O. BOX 34526 SEATTLE, WA 98124-1526</p>
2.123	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Construction work at PS K280 Educational Campus (A0069) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>SCHOOL CONSTRUCTION AUTHORITY 3030 THOMSON AVE LONG ISLAND CITY, NY 11101</p>
2.124	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Automotive Lease (A0071) Nature of Debtor's Interest: Lessee</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>SILVER STAR MOTORS 36-11 NORTHERN BLVD. LONG ISLAND CITY, NY 11101</p>

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2.125	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Subcontract Agreement (00199) Nature of Debtor's Interest: Subcontractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>SKANSKA USA BUILDING INC 350 5 TH AVENUE 32 TH FLOOR NEW YORK, NY 10118</p>
2.126	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Subcontract Agreement (00184) Nature of Debtor's Interest: Subcontractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>SKANSKA USA BUILDING INC EMPIRE STATE BUILDING 575 FIFTH AVENUE 29 TH FLOOR NEW YORK, NY 10017</p>
2.127	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Construction Agreement re: Carpentry for Project Dream (00269) Nature of Debtor's Interest: Subcontractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>SKANSKA USA BUILDING INC. 350 FIFTH AVE, 32ND FLOOR NEW YORK, NY 10118</p>
2.128	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Service Provider Agreement (00203) Nature of Debtor's Interest: Purchaser</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>SKANSKA USA CIVIL NORTHEAST INC 75-20 ASTORIA BOULEVARD, SUITE 200 EAST ELMHURST, NY 11370</p>
2.129	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Utility Contract (A0072) Nature of Debtor's Interest: Purchaser</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>SPECTRUM BUSINESS 400 ATLANTIC ST STAMFORD, CT 06901</p>
2.130	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>General Liability Policy #1000025504171 (A0021) Nature of Debtor's Interest: Insured</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>STARR INDEMNITY AND LIABILITY CO. 399 PARK AVE, 8TH FL NEW YORK, NY 10022</p>
2.131	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Workers' Compensation Policy # 100 0002201 (NY &NJ) (A0023) Nature of Debtor's Interest: Insured</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>STARR INDEMNITY AND LIABILITY CO. 399 PARK AVE, 8TH FL NEW YORK, NY 10022</p>

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2.132	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Automobile Policy # SISPCA08372917 (A0022) Nature of Debtor's Interest: Insured</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>STARR INDEMNITY AND LIABILITY CO. 399 PARK AVE, 8TH FL NEW YORK, NY 10022</p>
2.133	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Construction Agreement re: Concrete Masonry (00228) Nature of Debtor's Interest: Subcontractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>STEADFAST DEVELOPMENT AND CONSTRUCTION LLC 315 EAST 91ST ST, 5TH FL NEW YORK, NY 10128</p>
2.134	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Purchase Agreement re: Couplers (00149) Nature of Debtor's Interest: Purchaser</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>STRESSBAR SYETEMS INTERNATIONAL, LLC 670 BERGEN BOULEVARD RIDGEFIELD, NJ 7657</p>
2.135	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Construction Safety Services (00053) Nature of Debtor's Interest: Purchaser</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>STRUCTURE COMPLIANCE GROUP LLC 36-37 26TH STREET LONG ISLAND CITY, NY 11106</p>
2.136	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Safety Compliance Services Agreement (00160) Nature of Debtor's Interest: Purchaser</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>STRUCTURE COMPLIANCE GROUP, LLC 36-27 36TH STREET LONG ISLAND CITY, NY 11106</p>
2.137	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Construction Safety Services (00290) Nature of Debtor's Interest: Purchaser</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>STRUCTURE COMPLIANCE GROUP, LLC. 36-27 36TH STREET LONG ISLAND CITY, NY 11106</p>
2.138	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Construction Safety Services (00285) Nature of Debtor's Interest: Purchaser</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>STRUCTURE COMPLIANCE GROUP, LLC. 36-27 36TH STREET LONG ISLAND CITY, NY 11106</p>

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2.139	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Subcontract re: Time Warner Headquarters (00170) Nature of Debtor's Interest: Subcontractor</p>	<p>STRUCTURE TONE, LLC. 330 WEST 34TH STREET NEW YORK, NY 10001</p>
2.140	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Construction Agreement (00204) Nature of Debtor's Interest: Contractor</p>	<p>STV CONSTRUCTION, INC ATTN GUS MAIMIS, SR VP, PRINCIPAL EXECUTIVE 225 PARK AVENUE SOUTH NEW YORK, NY 10003</p>
2.141	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Collective Bargaining Agreement (A0019) Nature of Debtor's Interest: Employer</p>	<p>TEAMSTERS, L282 2500 MARCUS AVE NEW HYDE PARK, NY 11042</p>
2.142	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Agreement re: Purchase and Delivery of Supplies (00291) Nature of Debtor's Interest: Purchaser</p>	<p>TEC CRETE TRANSIT MIX CORP. 46-73 METROPOLITAN AVENUE RIDGEWOOD, NY 11385</p>
2.143	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Concrete Asbuilt Survey Agreement re: One Vanderbilt (00287) Nature of Debtor's Interest: Purchaser</p>	<p>TECTONIC ENGINEERING & SURVEYING CONSULTANTS, P.C. 70 PLEASANT HILL RD P.O. BOX 37 MOUNTAINVILLE, NY 10953</p>
2.144	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Construction Agreement re: 74 Trinity Place (00209) Nature of Debtor's Interest: Subcontractor</p>	<p>THE LAQUILA GROUP, INC 1590 TROY AVENUE BROOKLYN, NY 11234</p>
2.145	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Construction Supply Agreement re: Astoria Houses (00277) Nature of Debtor's Interest: Contractor</p>	<p>THE SAFETY GROUP LTD. 11 HANOVER SQ 15TH FLOOR NEW YORK, NY 10005</p>

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2.146	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Westlaw Subscription (00021) Nature of Debtor's Interest: Purchaser</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>THOMSON REUTERS 610 OPPERMAN DR PO BOX 64833 EAGAN, MN 55123-1803</p>
2.147	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Construction Agreement re: NYU LMC Ambulatory Care Center (00257) Nature of Debtor's Interest: Subcontractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>TISHMAN CONSTRUCTION CORP 100 PARK AVE NEW YORK, NY 10017</p>
2.148	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Construction Agreement re: residential homes in Queens NY (00211) Nature of Debtor's Interest: Subcontractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>TISHMAN CONSTRUCTION CORP OF NEW YORK 100 PARK AVE NEW YORK, NY 10017</p>
2.149	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Subcontract Agreement re: Riverside South Building K1 (00176) Nature of Debtor's Interest: Subcontractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>TISHMAN CONSTRUCTION CORP OF NEW YORK ATTN CONSTRUCTION COUNSEL GREENBERG, TRAGER & HERBST, LLP 767 THIRD AVENUE, 12TH FLOOR NEW YORK, NY 10017</p>
2.150	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Architect/Engineering Contract re: One Vanderbilt Ave (00123) Nature of Debtor's Interest: Subcontractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>TISHMAN CONSTRUCTION CORP. OF NEW YORK 100 PARK AVE 5TH FLOOR NEW YORK, NY 10017</p>
2.151	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>General Construction Contract re: Hurricane Sandy Residential Community Recovery in the Borough of Queens, NY (00122) Nature of Debtor's Interest: Subcontractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>TISHMAN CONSTRUCTION CORP. OF NEW YORK 100 PARK AVE NEW YORK, NY 10017</p>
2.152	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>General Construction Contract re: Hurricane Sandy Residential Community Recovery in the Borough of Queens, NY (00121) Nature of Debtor's Interest: Subcontractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>TISHMAN CONSTRUCTION CORP. OF NEW YORK 100 PARK AVE NEW YORK, NY 10017</p>

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2.153	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>General Construction Contract re: Hurricane Sandy Residential Community Recovery in the Borough of Queens, NY (00120) Nature of Debtor's Interest: Subcontractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>TISHMAN CONSTRUCTION CORP. OF NEW YORK 100 PARK AVE NEW YORK, NY 10017</p>
2.154	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Project Labor Agreement for One Vanderbilt (A0132) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>TISHMAN CONSTRUCTION CORPORATION OF NEW YORK ET AL 100 PARK AVE NEW YORK, NY 10017</p>
2.155	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Project Labor Agreement for Hurricane Sandy Community Recovery (A0126) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>TISHMAN CONSTRUCTION CORPORATION OF NEW YORK ET AL 100 PARK AVE NEW YORK, NY 10017</p>
2.156	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Subcontract Agreement (A0077) Nature of Debtor's Interest: Subcontractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>TISHMAN-TURNER JOINT VENTURE 111 BROADWAY, 4TH FLOOR NEW YORK, NY 10005</p>
2.157	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>General Construction re: Smith House (00165) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>TRIPLE H CONSTRUCTION 832 BETHLYNN COURT EAST MEADOW, NY 11554</p>
2.158	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>General Construction Contract re: Astoria Houses (00130) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>TRIPLE H CONSTRUCTION 832 BETHLYNN COURT EAST MEADOW, NY 11554</p>
2.159	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Construction Agreement re: Installation Of Emergency Generators And HSCIP (00154) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>TRIPLE H CONSTRUCTION, INC. 832 BETHLYNN COURT EAST MEADOW, NY 11554</p>

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2.160	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Construction Agreement re: Concrete Slab and broom finish (00248) Nature of Debtor's Interest: Subcontractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>TURNER CONSTRUCTION COMPANY 375 HUDSON ST, 6TH FL NEW YORK, NY 10004</p>
2.161	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Subcontract Agreement re: Sca PS 398 (Queens) (00195) Nature of Debtor's Interest: Subcontractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>TURNER CONSTRUCTION COMPANY 375 HUDSON ST, 6TH FL NEW YORK, NY 10004</p>
2.162	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Subcontract Agreement (00186) Nature of Debtor's Interest: Subcontractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>TURNER CONSTRUCTION COMPANY 375 HUDSON ST, 6TH FL NEW YORK, NY 10004</p>
2.163	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Subcontract Agreement (00181) Nature of Debtor's Interest: Subcontractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>TURNER CONSTRUCTION COMPANY 375 HUDSON ST, 6TH FL NEW YORK, NY 10004</p>
2.164	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Managed Safety System Service Agreement (00054) Nature of Debtor's Interest: Purchaser</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>U.S. COMPLIANCE SYSTEMS 789 NORTON DR PO BOX 116 TALLMADGE, OH 44278</p>
2.165	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>General Construction re: Smith House (00166) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>UPTOWN ELECTRIC, INC 22 MARY AVE RONKONKOMA, NY 11779</p>
2.166	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>General Construction Contract (00124) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>US DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT</p>

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2.167	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Construction Agreement re: Roofing Replacement And Exterior Restoration Work (00157) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Varsity Plumbing & Heating, Inc. 31-99 123 STREET FLUSHING, NY 10017</p>
2.168	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Construction Agreement re: Installation Of Emergency Generators And HSCIP (00155) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Varsity Plumbing & Heating, Inc. 31-99 123 STREET FLUSHING, NY 11354</p>
2.169	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Subcontractor Agreement re: Hurricane Sandy Residential Community Recovery Package #21 (00352) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Varsity Plumbing and Heating Inc. 31-99 123RD ST FLUSHING, NY 11354</p>
2.170	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>General Construction re: Smith House (00167) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Varsity Plumbing and Heating, Inc 3199 123RD STREET FLUSHING, NY 11354</p>
2.171	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>General Construction Contract re: Hurricane Sandy Residential Community Recovery Package #33 (00140) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Varsity Plumbing and Heating, Inc 31-99 123RD STREET FLUSHING, NY 11354</p>
2.172	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>General Construction Contract re: Hurricane Sandy Residential Community Recovery Package #22 (00137) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Varsity Plumbing and Heating, Inc 31-99 123RD STREET FLUSHING, NY 11354</p>
2.173	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>General Construction Contract (00134) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Varsity Plumbing and Heating, Inc 31-99 123RD STREET FLUSHING, NY 11354</p>
	<p>Expires 05/30/2018</p>	

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2.174	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Restoration Construction Contract re: Astoria Houses (00131) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Varsity Plumbing and Heating, Inc 31-99 123RD STREET FLUSHING, NY 11354</p>
2.175	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Utility Contract (A0079) Nature of Debtor's Interest: Purchaser</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Verizon P.O. BOX 4003 ACWORTH, GA 30101</p>
2.176	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Construction Agreement re: Roofing Replacement And Exterior Restoration Work (00158) Nature of Debtor's Interest: Contractor</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Veststar Inc. 4 Hemlock Lane FLANDERS, NJ 07836</p>
2.177	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>2015 Hino 195 & 2016 Mack Tractor Lease (A0080) Nature of Debtor's Interest: Lessee</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>VFS US LLC P.O. BOX 26131 GREENSBORO, NC 27402</p>
2.178	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Pollution/Professional Liability Insurance (A0081) Nature of Debtor's Interest: Insured</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>XL Catlin ATTN: REGULATORY DEPT. 505 Eagleview Blvd., Ste. 100 EXTON, PA 19341-1120</p>
2.179	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Insurance Policy (A0082) Nature of Debtor's Interest: Insured</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>Zurich in North America Customer Inquiry Center 1299 Zurich Way Schaumburg, IL 60196-1056</p>

Fill in this information to identify the case:

Debtor name Navillus Tile, Inc.

United States Bankruptcy Court for the: Southern

District of NY
(State)

Case number (If known): 17-13162 (SHL)

☐ Check if this is an amended filing

Official Form 206H

Schedule H: Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Does the debtor have any codebtors?

☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.☒ Yes2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, **Schedules D-G**. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the code debtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2.1 ADVANCED CONTRACTING SOLUTIONS,LLC	1160 COMMERCE AVENUE BRONX, NY 10462	CARPENTERS FUNDS	<input checked="" type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input checked="" type="checkbox"/> G
2.2 ADVANCED CONTRACTING SOLUTIONS,LLC	1160 COMMERCE AVENUE BRONX, NY 10462	CEMENT WORKERS FUNDS	<input checked="" type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input checked="" type="checkbox"/> G
2.3 ADVANCED CONTRACTING SOLUTIONS,LLC	1160 COMMERCE AVENUE BRONX, NY 10462	LOCAL 282 FUNDS	<input checked="" type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input checked="" type="checkbox"/> G
2.4 ADVANCED CONTRACTING SOLUTIONS, LLC	1160 COMMERCE AVENUE BRONX, NY 10462	LOCAL 46 FUNDS	<input checked="" type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input checked="" type="checkbox"/> G
2.5 ADVANCED CONTRACTING SOLUTIONS, LLC	1160 COMMERCE AVENUE BRONX, NY 10462	LOCAL 780 FUNDS	<input checked="" type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input checked="" type="checkbox"/> G
2.6 DONAL O'SULLIVAN		LIBERTY MUTUAL INSURANCE COMPANY	<input checked="" type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input checked="" type="checkbox"/> G

Debtor

Navillus Tile, Inc.

Case number (if known) 17-13162 (SHL)

Additional Page if Debtor Has More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2.7 DONAL O'SULLIVAN		SIGNATURE BANK	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.8 HDK CONSTRUCTION, LLC	355 LEXINGTON AVE NEW YORK, NY 10017	CARPENTERS FUNDS	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.9 HDK CONSTRUCTION, LLC	355 LEXINGTON AVE NEW YORK, NY 10017	CEMENT WORKERS FUNDS	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.10 HDK CONSTRUCTION, LLC	355 LEXINGTON AVE NEW YORK, NY 10017	LOCAL 282 FUNDS	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.11 HDK CONSTRUCTION, LLC	355 LEXINGTON AVE NEW YORK, NY 10017	LOCAL 46 FUNDS	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.12 HDK CONSTRUCTION, LLC	355 LEXINGTON AVE NEW YORK, NY 10017	LOCAL 780 FUNDS	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.13 KATHLEEN O'SULLIVAN		LIBERTY MUTUAL INSURANCE COMPANY	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.14 TIMES SQUARE CONSTRUCTION, INC.	355 LEXINGTON AVE NEW YORK, NY 10017	CARPENTERS FUNDS	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Debtor Navillus Tile, Inc. Case number (if known) 17-13162 (SHL)
Name

Additional Page if Debtor Has More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Add Section

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2.15 TIMES SQUARE CONSTRUCTION, INC.	355 LEXINGTON AVE NEW YORK, NY 10017	CEMENT WORKERS FUNDS	<input checked="" type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.16 TIMES SQUARE CONSTRUCTION, INC.	355 LEXINGTON AVE NEW YORK, NY 10017	LOCAL 282 FUNDS	<input checked="" type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.17 TIMES SQUARE CONSTRUCTION, INC.	355 LEXINGTON AVE NEW YORK, NY 10017	LOCAL 46 FUNDS	<input checked="" type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.18 TIMES SQUARE CONSTRUCTION, INC.	355 LEXINGTON AVE NEW YORK, NY 10017	LOCAL 780 FUNDS	<input checked="" type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.____			<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.____			<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.____			<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.____			<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G